14000002496

| (Requestor's Name) | | | |
|---|--|--|--|
| (Address) | | | |
| (Address) | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies Certificates of Status | | | |
| Special Instructions to Filing Officer: | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Office Use Only



100306681891





DEC 15 2017 Y SULKER CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE: 954931 4370126 AUTHORIZATION (COST LIMIT ORDER DATE: December 13, 2017 ORDER TIME : 2:17 PM ORDER NO. : 954931-050 CUSTOMER NO: 4370126 FOREIGN FILINGS NAME: FUSION WORLD DD LLC _ CORPORATE LIMITED PARTNERSHIP XX LIMITED LIABILITY COMPANY XXXX WITHDRAWAL/CANCELLATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF STATUS

EXAMINER:

CONTACT PERSON: Roxanne Turner - EXT#

COVER LETTER

TO: Registration Section Division of Corporations

| SHD IF CT. | FUSION W | ORLD DD LLC | | |
|---|---|---|---|--------------------|
| SUBJECT: | (Name of For | eign Limited Liability | Company) | |
| Dear Sir or Madam: | | | | |
| The enclosed withdi | rawal and fee(s) are submitte | d for filing. | | |
| Please return all cor | respondence concerning this | matter to the following | y: | |
| Marjorie Kipp, Cor | porate and Real Estate Parale | egal | | |
| | (Name of Person) | | _ | |
| LVMH Moet Henn | essy Louis Vuitton Inc. | | | |
| | (Firm/Company) | 1.18 1.00 | _ | |
| 19 East 57th Street, | 5th Floor | | | |
| | (Address) | | _ | |
| New York, NY 100 | 22 | | | |
| | (City/State and Zip Cud | e) | _ | SSE NANA MPD |
| For further informat | ion concerning this matter, p | lease call: | | OF S |
| Marjorie Kipp | | 212 at (| 931 2725 | RIA G |
| (7) | ame of Person) | (Area Code & | E Daytime Telephone Number) | |
| Registratio Division of Clifton Bui 2661 Exect | Corporations | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 | | |
| Enclosed is a check | for the following amount: | | | |
| □ \$25 Filing Fee | □ \$30 Filing Fee & Certificate of Status | ☐ \$55 Filing Fee & Certified Copy | \$60 Filing Fee, Certificate of Status & Certified Copy | |

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

| FUSION WORLD DD LLC | |
|---|-------------|
| (Name of limited liability company) | |
| DELAWARE | |
| (Jurisdiction of its organization) | |
| (Date registered with Florida Department of State) | |
| M14000002496 | |
| (Flòrida Document Number) | |
| This limited liability company is withdrawing its certificate of authority in this state. Effective Date, if other than the date of filing: on 11:59 P.M. on December 31, 2017 (optional (If an effective date is listed, the date must be specific and cannot be prior to date of filing of more than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory filing reddirect this date will not be listed as the document's effective date on the Department of State street (Signature of authorized representative) | 0EC 13 |
| LOUISE FIRESTONE | |
| (Typed or printed name of signee) | |

Filing Fee: \$25.00