## M14000002528

| (Requestor's Name)                      |
|---|
|   |
| (Address)                               |
|   |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| (CityState/2)p/Filone #/                |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
|   |
| Special Instructions to Filing Officer: |
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|   |

Office Use Only



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01/04/16--01002--008 \*\*29

700 LLC With



JAN -5 2016 N. CAUSSEAUX

## \* COVER LETTER

| TO: Registration Division of   | n Section<br>Corporations                 |   |   |
|--|---|---|---|
| CRO SUBJECT:   | SSMARK CONSUME                            | R ENGAGEMEN   | TS, LLC   |
|  | (Name of For                              | reign Limited Liability (   | Company)  |
| Dear Sir or Madam:   |   |   |   |
| The enclosed withdr  | awal and fee(s) are submitte              | d for filing.   |   |
| Please return all corr   | espondence concerning this                | matter to the following   | :   |
| CAROLYN PE   | ≣T  |   | •   |
|  | (Name of Person)                          |   |   |
| CROSSMARK  | CONSUMER ENGAG                            | GEMENTS, LLC  | ,   |
|  | (Firm/Company)                            | •   | •   |
| 5100 LEGACY  | DRIVE                                     |   |   |
|  | (Address)                                 |   | •   |
| PLANO, TX 75   | 024                                       |   |   |
|  | (City/State and Zip Cod                   | le)   | •   |
| For further informati  | on concerning this matter, p              | lease call:   |   |
| CAROLYN PE   | ET  | 469<br>at (   | 814-1296  |
| (N   | ame of Person)                            |   | Daytime Telephone Number)                                       |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 |   | 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,<br>Certificate of Status &<br>Certified Copy |

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

| CROSSMARK CONSUMER ENGAGEMENTS, LLC   |
|---|
| (Name of limited liability company)   |
| DELAWARE  |
| (Jurisdiction of its organization)  |
| 4/14/2014   |
| (Date registered with Florida Department of State)  |
| M14000002528  |
| (Florida Document Number)   |
| This limited liability company is withdrawing its certificate of authority in this state. |
| (Signature of authorized representative)  JOHNETTE ODEN-BRUNSON                           |
| (Typed or printed name of signee)   |

Filing Fee: \$25.00

