

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

mis00000315

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H160003187073)))



H160003187073ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614) 280-3338
Fax Number : (954) 208-0845

**LLC DISSOLUTION OR WITHDRAWAL
VAPORMAX FRANCHISING, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

RECEIVED
2016 DEC 29 PM 3:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu Corporate Filing Menu Help

FILED
16 DEC 29 AM 10:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT
DEC 30 2016

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Vapormax Franchising LLC

(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Norine Nagel

(Name of Person)

CT Corporation System

(Firm/Company)

8020 Excelsior Drive, Suite 200

(Address)

Madison, WI 53717

(City/State and Zip Code)

For further information concerning this matter, please call:

Norine Nagel

608

827-7660

at (_____) _____

(Name of Person)

(Area Code & 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,
Certificate of Status &
Certified Copy

FILED
16 DEC 29 AM 10:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Vapornax Franchising LLC

(Name of limited liability company)

DE

(Jurisdiction of its organization)

01/13/2015

(Date registered with Florida Department of State)

M15000000315

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.



(Signature of authorized representative)

Angela Vaccaro

(Typed or printed name of signee)

Filing Fee: \$25.00

FILED
16 DEC 29 AM 10:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA