

MI5000006735

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

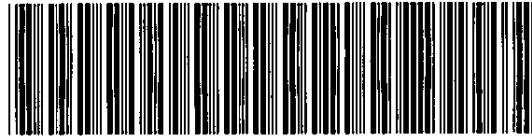
(Business Entity Name)

(Document Number)

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2016 SEP - 8 A 7:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S Warren

SEP 09 2016



Florida

Parametric Dining LLC
1315 Walnut Street
Suite 700
Philadelphia PA 19107

To whom it may concern,

This cover letter and attached documents should serve as notice that Parametric Dining LLC has ceased doing business and has dissolved in its jurisdiction of formation, Delaware.

Use the stamped return postage attached to return the documents after signing.

Please return a time-stamped copy along with the receipt.

Geoffrey Johnson
CEO - Parametric Dining LLC

Filing fee: \$25
Copies: \$35
NCR filing fee: \$98

\$158

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Parametric Dining 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:

Geoffrey Johnson

(Name of Person)

Bypass Mobile LLC

(Firm/Company)

1315 Walnut Street, Suite 700

(Address)

Philadelphia, PA 19107

(City/State and Zip Code)

For further information concerning this matter, please call:

Geoffrey Johnson

(Name of Person)

at (**215**)

4755499

(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

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Parametric Dining LLC

(Name of limited liability company)

DE

(Jurisdiction of its organization)

8/13/2015

(Date registered with Florida Department of State)

M15000006735

(Florida Document Number)

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



(Signature of authorized representative)

Geoffrey Johnson

(Typed or printed name of signee)

Filing Fee: \$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA