M1900000 1158

(Re	equestor's Name)				
(Address)					
(Ac	ddress)				
(Ci	ty/State/Zip/Phone	e #)			
PICK-UP	MAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					





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R. WHITE FEB 13 2020 21 17 1:53

COVER LETTER

TO:	Registration Division of	Section Corporations			
SUBJE	ст: <u></u> Ап	nerican	Spirit (Name of Fore	Data Solut eign Limited Liability	Company)
Dear Si	r or Madam:				
The enc	losed withdr	awal and fee(s) are submitted	d for filing.	
Please r	eturn all corr	espondence co	ncerning this	matter to the following	g:
	Sarin	Tys da (Name o	f Person)	· · · · · · · · · · · · · · · · · · ·	-
An	erican	5. r; t) (Firm/Co	ompany)	olutions LL	<u>C</u>
749	0 601	den Tr	iongle!	Drive	_
Ede	en fra	icie, MN	5534	4	_
		ion concerning		,	
7	Sovin	TysJa ame of Person)	1	at (6/2 (Area Code &) 886-3400 & Daytime Telephone Number)
	Division of P.O. Box	on Section of Corporati			Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclose	d is a check	for the follow	ing amount:		
⊠\$ 25 1	Filing Fee	□ \$30 Filin Certifica	g Fee & te of Status	☐\$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

American Spirit Data Solutions LLC (Name of limited liability company)	
(Name of limited liability company)	
Tlino, 5 (Jurisdiction of its organization)	
(Jurisdiction of its organization)	
(Date registered with Florida Department of State)	
(Date registered with Florida Department of State)	
M 19 00000 1158 (Florida Document Number)	
(Florida Document Number)	
Effective Date, if other than the date of filing:	requirements
	2623
Down Bold	22
(Signature of authorized representative)	
Dorin Tysdal	.21 P8 1:53
(Typed or printed name of signee)	ಮ

Filing Fee: \$25.00