

M19 00000 2015

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

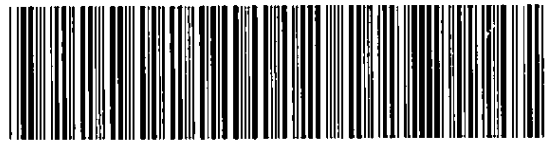
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE ~
APR - 3 2023

Office Use Only



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FALLS CHURCH

2023 APR - 3 AM 8:23

ALL AMASSEL, VA

2023 MAR 24 PM 4:03

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 28, 2023

COGENCY GLOBAL

SUBJECT: FIRST FINANCIAL MERCHANT SERVICES, LLC
Ref. Number: M19000002075

We have received your document . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

THIS BUSINESS WAS REINSTATED ON 3-24-23, PLEASE VERIFY IF YOU WOULD LIKE TO DISSOLVE YOUR BUSINESS.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Jasmine N Horne
Regulatory Specialist II

Letter Number: 023A00007042

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2023 MAR 31 PM 12:15

ALLAHASSI, J. H.



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 120000000088

Date: 03/31/2023

Name: Chris Vick

Reference #: 1934513

Entity Name: FIRST FINANCIAL MERCHANT SERVICES LLC

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

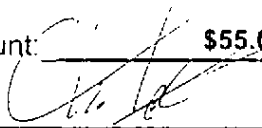
☒ Dissolution/Withdrawal

☐ Fictitious Name

☒ Other CERTIFIED COPY UPON FILING

***PLEASE FILE ASAP-
WITHDRAWAL CONFIRMED***

Authorized Amount: \$55.00

Signature: 



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WITHDRAWAL CONFIRMED***

Authorized Amount: \$55.00

Signature: 

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

First Financial Merchant Services, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

February 27, 2019

(Date registered with Florida Department of State)

M19000002075

(Florida Document Number)

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

Effective Date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

/s/ Matt Austin

(Signature of authorized representative)

Matt Austin, COO

(Typed or printed name of signee)

Filing Fee: \$25.00