1119000005759

(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:	

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2020 MAY -6 AH 8: 18

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MAY 0 7 2020

CORPORATION SERVICE COMPANY
1201 Hays Street

Tallahassee, FL 32301 Phone: 850-558-1500

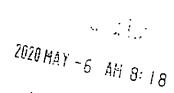
ACCOUNT NO. : I2000000195
REFERENCE 279855 8182242
AUTHORIZATION : STREW & MON
COST LIMIT : \$ 60.00
ORDER DATE : May 4, 2020
ORDER TIME : 11:50 AM
ORDER NO. : 279855-020
CUSTOMER NO: 8182242
FOREIGN FILINGS
NAME: HSC FINANCIAL, LLC
CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY
XXXX WITHDRAWAL/CANCELLATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XX CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF STATUS

EXAMINER:

CONTACT PERSON: Amanda Robinson - EXT#

COVER LETTER

TO: Registration Division o	in Section f Corporations			
HSC SUBJECT:	Financial, LLC			
30bile1	(Name of Fo	reign Limited Lia	ility Company)	
Dear Sir or Madam	:			
The enclosed withd	rawal and fee(s) are submitte	ed for filing.		
Please return all cor	respondence concerning this	matter to the follo	wing:	
Matt Sargent				
	(Name of Person)			
HSC Financial, LL	С			
•	(Firm/Company)			
963 E. 4th Street				
	(Address)			
Los Angeles, CA	00013			
	(City/State and Zip Coc	de)		
For further information	tion concerning this matter, p	olease call:		
Matt Sargent		650 at (796-8413	
(5	same of Person)		ode & Daytime Telephor	e 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		ns
Enclosed is a check	c for the following amount:			
S25 Filing Fee	S30 Filing Fee & Certificate of Status	S55 Filing Fe Certified Cop		of Status &



NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

ISC Financial, LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
une 12, 2019
(Date registered with Florida Department of State)
<i>4</i> 19 0 00005759
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state. If fective Date, if other than the date of filing:
Gory Ruan 9388AC2835324F0 (Signature of authorized representative)
George Ruan, CEO and Manager
(Typed or printed name of signee)

Filing Fee: \$25.00