

M20000007354

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

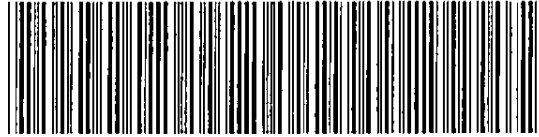
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200432732082

LLC withdrawal

FILED

2024 SEP 19 AM 8:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

2024 SEP 19 AM 10:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. RAMSEY
SEP 20 2024

CT CORP
(850) 656- 4724
3458 lakesore Drive
Tallahassee, FL 32312

Date: 09/19/2024

Acc#I20160000072

eric DW

Name:	Americold Transportation Services, LLC
Document #:	
Order #:	15878627

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>
	Plain: <input type="checkbox"/>
	COGS: <input type="checkbox"/>

Email Address for Annual Report Notifications:

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Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ **55.00**

Thank you!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Americold Transportation Services, 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:

Julie Peyton

(Name of Person)

Americold Logistics, LLC

(Firm/Company)

10 Glenlake Parkway NE, South Tower, Suite 600

(Address)

Atlanta, Georgia 30328

(City/State and Zip Code)

For further information concerning this matter, please call:

Julie Peyton

(Name of Person)

at (404) 719-3095

(Area Code & Daytime Telephone Number)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

2024 SEP 19 AM 8:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Americold Transportation Services, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

August 24, 2020

(Date registered with Florida Department of State)

M20000007354

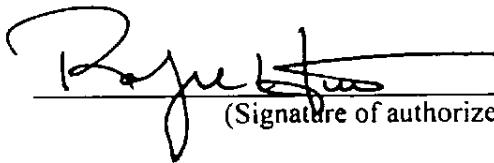
(Florida Document Number)

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.



(Signature of authorized representative)

Randolph L. Hutto, Authorized Representative

(Typed or printed name of signee)

Filing Fee: \$25.00