M20 0000 11584

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Only	,



01/31/22--01010--021 **25.00



COVER LETTER

TO: Registration Section Division of Corporations

IMAGE FIRST CONSULTING LLC

SUBJECT:

(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:

Eric Barrett

(Name of Person)

IMAGE FIRST CONSULTING LLC

(Firm/Company)

75 Elmview Ave

(Address)

Hamburg NY 14075

(City/State and Zip Code)

For further information concerning this matter, please call:

Eric Barrett

(Name of Person)

716 at (_____

(Area Code & Daytime Telephone Number)

289-3597

)_

<u>Mailing Address:</u> 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 &	🗆 \$55 Filing Fee &	🗇 \$60 Filing Fee,
	Certificate of Status	Certified Copy	Certificate of Status &
			Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

IMAGE FIRST CONSULTING LLC

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<u>ن</u> ا

	(Name of limited liability company)	
NEW YORK		
	(Jurisdiction of its organization)	
02/03/2021		
· · · · · · · · · · · · · · · · · · ·	(Date registered with Florida Department of State)	· · · · · · · · · · · ·
M20000011584		
	(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: $\frac{01/29/2022}{}$ (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.

102 18 18 19 200 (Signature of authorized representative) Eric Barrett (Typed or printed name of signee)