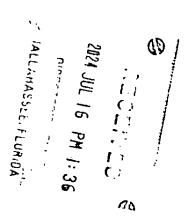
# M7200006658

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
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Allassee, File

### Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953

#### **ORDER FORM**

TO Florida Department of State

> The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

corphelp@dos.myflorida.com 850-245-6051

**FROM** Melissa Moreau

mmoreau@incserv.com

850.656.7953

**REQUEST DATE** 07/16/2024

**PRIORITY** Routine

OUR REF # (Order ID#) Devon

**ORDER ENTITY** 

**Shopworks Software LLC** 

#### PLEASE PERFORM THE FOLLOWING SERVICES:

Please file the attached withdrawal document.

NOTES:

\$25.00 Authorized

Shopworks Software LLC

**RETURN/FORWARDING INSTRUCTIONS:** 

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Shopworks Software LLC		
(Name of limited liability company)		
Delaware		
(Jurisdiction of its organization)		
04.28.2022	<b>?</b> :	3 :D
(Date registered with Florida Department of State)	- 2	-
M22000006658	> <u>7.1</u>	
(Florida Document Number)  Company is withdrawing its certificate of authority in this stage.	7 7 7 8 8	
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Effective Date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date o more than 90 days after filing.)  Note: If the date inserted in this block does not meet the applicable statutory filing this date will not be listed as the document's effective date on the Department of St	requiren	or nents.
DocuSigned by:		
Charles kallenbach		
(Signature of authorized representative)		
Charles Kallenbach		
(Typed or printed name of signee)		

Filing Fee: \$25.00