## M22000011786

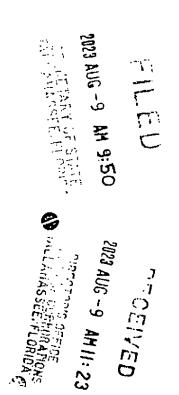
| (Requestor's Name)                      |
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| (Address)                               |
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|   |
| (Address)                               |
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|   |
| (City/State/Zip/Phone #)                |
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| PICK-UP WAIT MAIL                       |
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|   |
| (Business Entity Name)                  |
| (===::================================= |
|   |
| (Document Number)                       |
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|   |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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LLC withdraws



A. RAMSEY AUG 1 0 2023 CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 925269 828548

AUTHORIZATION : \$ 25.00 ORDER DATE : August 8, 2023 ORDER TIME : 9:16 AM ORDER NO. : 925269-020 CUSTOMER NO: 8285483 FOREIGN FILINGS NAME: FLOTECH, LLC \_\_ CORPORATE LIMITED PARTNERSHIP XXX LIMITED LIABILITY COMPANY XXXX WITHDRAWAL/CANCELLATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_\_ CERTIFIED COPY XX \_\_ PLAIN STAMPED COPY CERTIFICATE OF STATUS

EXAMINER: \_\_\_

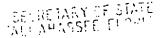
CONTACT PERSON: Eyliena Baker - EXT#

## **COVER LETTER**

| Division of           | Corporations                                 |                                   |  |
|-----------------------|--|-----------------------------------|--|
| SUBJECT:FLOT          | TECH, LLC                                    |                                   |  |
|                       | (Name of For                                 | reign Limited Liability           | Company)   |
| Dear Sir or Madam:    |  |                                   |  |
| The enclosed withdi   | awal and fee(s) are submitte                 | ed for filing.                    |  |
| Please return all cor | respondence concerning this                  | matter to the followin            | g:   |
| KATIE ANN FIG         | UEROA  |                                   |  |
|                       | (Name of Person)                             |                                   | _  |
| FLOWORKS INT          | ERNATIONAL LLC                               |                                   |  |
|                       | (Firm/Company)                               |                                   | _  |
| 3750 HIGHWAY          | · 225  |                                   |  |
|                       | (Address)                                    | -                                 | _  |
| PASADENA, TE          | XAS 77503                                    |                                   |  |
|                       | (City/State and Zip Cod                      | e)                                | _  |
| For further informat  | ion concerning this matter, p                | lease call:                       |  |
| KATIE ANN FIGUI       | EROA   | at (                              | ) 659-2664   |
| (N                    | ame of Person)                               | (Area Code &                      | & Daytime Telephone Number)  |
| Division P.O. Box     | on Section of Corporations                   |                                   | 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 &<br>Certificate of Status | ☐\$55 Filing Fee & Certified Copy | <ul> <li>\$60 Filing Fee.</li> <li>Certificate of Status &amp;</li> <li>Certified Copy</li> </ul>  |

FILEU

2823 AUG -9 AM 9: 50



## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

| PLOTPOULLE   |
|--|
| FLOTECH, LLC   |
| (Name of limited liability company)  |
|  |
| DELAWARE   |
| (Jurisdiction of its organization)   |
| HH M 22 2022   |
| JULY 27, 2022  (Date registered with Florida Department of State)                                    |
| (Bate registered with Florida Department of State)   |
| M22000011786   |
| (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: AUGUST 10TH, 2023 (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.  |
|  |
|  |
|  |
| Eliquit B. Hawkini (Signature of authorized representative)  |
| (Signature of authorized representative)   |
| (9   |
|  |
| ELIZABETH BAZAN HAWKINS  |
| (Typed or printed name of signee)  |

Filing Fee: \$25.00