

M23 000006808

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

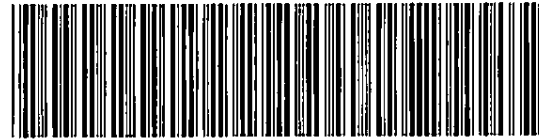
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF STATE
TALLAHASSEE, FL

2024 DEC 19 AM 11:39

CLERK OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Formal Foundry, 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:

Peter Hubshman

(Name of Person)

AlwaysLiveOnline.com LLC

(Firm/Company)

1010 5th Ave (PHW)

(Address)

New York, NY 10028

(City/State and Zip Code)

For further information concerning this matter, please call:

Peter Hubshman

(Name of Person)

917

at ()

847-3005

(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

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STATE OF FLORIDA
TALLAHASSEE, FL

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NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Formal Foundry, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

May 25, 2023

(Date registered with Florida Department of State)

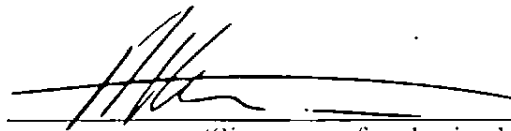
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(Florida Document Number)

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)

Peter Hubshman

(Typed or printed name of signee)

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TALLAHASSEE, FL

Filing Fee: \$25.00