

P 19409

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

WALK IN \$ 35.00

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S TALLENT

SEP 28 2017


WTH

FILED

17 SEP 27 AM 10:20

17 SEP 27 AM 10:43

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 831637 9881C
AUTHORIZATION : 
COST LIMIT : \$ 35.00

ORDER DATE : September 22, 2017
ORDER TIME : 9:24 AM
ORDER NO. : 831637-030
CUSTOMER NO: 9881C

FOREIGN FILINGS

NAME: MOBIL NATURAL GAS INC.

XXX CORPORATE
 LIMITED PARTNERSHIP
 LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XXX PLAIN STAMPED COPY
 CERTIFICATE OF STATUS

CONTACT PERSON: Roxanne Turner - EXT#

EXAMINER: _____

**APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF
AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA**

Mobil Natural Gas Inc.

(Name of Corporation)

P19409

(Document Number of Corporation (if known))

Delaware

(Incorporated Under Laws of)

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address for the corporation:

Exxon Mobil Corporation, Attn: Kim Young, 5959 Las Colinas Blvd.

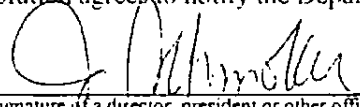
(Mailing Address)

Irving, TX 75039

(City/ State /Zip)

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The corporation agrees to notify the Department of State in the future of any change in its mailing address.



(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

9/20/17

(Date)

J.L. Schmoker

(Typed or printed name of person signing)

Secretary

(Title of person signing)

FILING FEE \$35