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Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 481176 8296505

AUTHORIZATION

ORDER DATE: May 31, 2024

ORDER TIME : 10:09 AM

ORDER NO. : 481176-045

CUSTOMER NO: 8296505

FOREIGN FILINGS

NAME: ROYAL PREMIUM BUDGET, INC.

XX CORPORATE ___ LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX PLAIN STAMPED COPY ___ CERTIFICATE OF STATUS

CONTACT PERSON: Shauna Godbolt - EXT#

EXAMINER:

COVER LETTER

| TO: Amendment Section Division of Corporations | | |
|--|--|--|
| SUBJECT: Royal Premium Budget, Inc. | | |
| 30B/I.CT | (Name of Corporation) | |
| DOCUMENT NUMBER: P32813 | | |
| The enclosed withdrawal application and | I fee are submitted for filing. | |
| Please return all correspondence concerning | ng this matter to the following: | |
| | (Name of Person) | |
| | (Firm/Company) SECRE | :===================================== |
| | (Firm/Company) (Address) City/State and Zip code) | |
| (C) For further information concerning this mat | City/State and Zip code) | 1:12 |
| | at () | |
| (Name of Person) | at () (Area Code & Daytime Telephone Number) | |
| Enclosed is a check for the amount: | | |
| □ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status | ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee. Certified Copy (Additional copy is Enclosed) ☐ \$52.50 Filing Fee. Certificate of Status & Certificate of | |
| Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 | Street Address: Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 | |

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

| | Royal Premium Budget, Inc. | |
|-----------|--|---|
| <i>*</i> | (Name of Corporation) | - |
| | P32813 | |
| | (Document Number of Corporation | (if known) |
| *** | • | . - • |
| | Michigan 03/04/1988 | |
| | (Incorporated Under Laws of and date authorized to transa | et business/conductius affairs) = - |
| | rporation is no longer transacting business or conducting a fily surrenders its authority to transact business or conduct | |
| appoints | rporation revokes the authority of its registered agent in s the Department of State as its agent for service of process was authorized to transact business or conduct affairs in Flo | based on a cause of action arising during the |
| The follo | owing is a current mailing address for the corporation: | |
| | 30833 Northwestern Hwy Suite 220 | 77.77 |
| | (Mailing Address) | |
| | Farmington Hills, MI 48334 | |
| | (City/ State /Zip) | |
| The corp | poration agrees to notify the Department of State in the fut | ure of any change in its mailing address. |
| | - L'Hel | 05/29/2024 |
| (| Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) | (Date) |
| | Kevin M. Heckman | Treasurer |
| - | (Typed or printed name of person signing) | (Title of person signing) |