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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: MCRAE RIDDLE	INC.
(Nam	e of Corporation)
DOCUMENT NUMBER: F1400	0005497
The enclosed withdrawal application and fee are	submitted for filing.
Please return all correspondence concerning this matter to the following:	
G. LORIN RIDDLE	
G. LORIN RIDDLE (Nam	ne of Person)
MIRAGE PIDDIE	T., , c
MCRAE RIDDLE S	n/Company)
C99 (A., 174.7)	2 4
599 SMITHBRIAR	Address)
VALDOSTA, GA. 3 (City/Sta	ate and Zip code)
For further information concerning this matter, ple	ease call:
G. LORIN RIDDLE	at (Z 2 9) 300 - 3 3 (Area Code & Daytime Telephone Number)
(Name of Person) Enclosed is a check for the amount:	(Area Code & Daytime Telephone Number)
(Ac	\$3.75 Filing Fee & \$\int \frac{\text{\$52.50}}{\text{ Filing Fee,}}\$ Certificate of Status & Certified dditional copy is Copy (Additional copy is enclosed) aclosed)
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	2661 Executive Center Circle
Tallahassee, FL.32314	Tallahassee, FL. 32301

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

F14000005497
(Document Number of Corporation (if known)
GEORIA
Georia (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:
599 CMITHERIAR DAINE
599 SM (THBRIAR DRIVE (Mailing Address)
VALDOSTM, GA-31602 City/ State /Zip)
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) (Date)
G. LONIN RIDDCE PASSIBONT (Typed or printed name of person signing) (Title of person signing)

FILING FEE \$35