

The Commonwealth of Massachusetts William Francis Galvin

Secretary of the Commonwealth One Ashburton Place, Boston, Massachusetts 02108-1512

Foreign Certificate of Withdrawal FORM MUST BE TYPED FORM MUST BE TYPED (General Laws Chapter 156D, Section 15.20; 950 CMR 113.51)

(1)	xact name of corporation:							
(2)	urisdiction of incorporation:	cause						
	Date of incorporation:							
(3)	he corporation is not transacting business in the commonwealth.							
(4)	The corporation surrenders its authority to transact business in the commonwealth.							
(5)	The corporation revokes the authority of its registered agent to accept service on its behalf.							
(6)	The Secretary of the Commonwealth is hereby appointed as its agent for service of process in any proceeding based on a cause of action arising during the time it was authorized to transact business in the commonwealth.							
(7)	7) The corporation's mailing address to which the Division may mail a copy of any process served on it:							
	(number, street, city or town, state, zip code)							
(8)	he corporation shall notify the Division in the future of any changes to the above mailing address by filing a certificate of mendment.							
(9)	The corporation hereby certifies that all taxes known to the corporation to be due the commonwealth have been paid or provided for.							
(10	his certificate is effective at the time and on the date approved by the Division, unless a later effective date not more than ays from the date of filing is specified:	90						
Sig	d by:							
	(signature of authorized individual) ☐ Chairman of the board of directors,							
	☐ President,							
	☐ Other officer,							
	☐ Court-appointed fiduciary,							
on	is, day of,,							

COMMONWEALTH OF MASSACHUSETTS

William Francis Galvin

Secretary of the Commonwealth One Ashburton Place, Boston, Massachusetts 02108-1512

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I hereby certify that upon examination of this foreign certificate withdrawal, duly

	having been paid	d, said certificate	is deemed to hav	e been filed v		
		_ day of <u>.</u>	, 20		a.m./p.m.	
	ите					
	Effective date:					
	(must be within 90 days of date submitted)					
	WILLIAM FRANCIS GALVIN Secretary of the Commonwealth					
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		TO BE FILLE C	D IN BY CO ontact Information		ION	
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