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Michael G. Adams Kentucky Secretary of State Received and Filed: 1/13/2025 2:43 PM Fee Receipt: \$40.00



COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Certificate of Withdraw (Foreign Business Entity)	al	WFE
Pursuant to the provisions of KR business entity named below an	S 14A - 030 the undersigned applies for that purpose, submits the following	or a certificate of withdring statements:	rawal on behalf of the
1. The name of the business en	tity is Canon Solutions America, Inc.		
	(The name must be identical to the	name on record with th	ne Secretary of State.)
2. The state or country of forma	tion is New York		
3. The Secretary of State may f	orward to the business entity at the follogical commits to notify the Secretary of Sta	owing street address a ate of any future chang	ny process served es to this address:
One Canon Park	Melville	NY	11747
Street Address (No Post Office B	ox Numbers) City	State	Zip Code
in the Commonwealth or pursua authority from the commissioner 5. The business entity revokes appoints the Secretary of State	nsacting business in the Commonweal nt to KRS 14A.9-010(7) the business e of the Department of Insurance. the authority of its registered agent to a sits agent for service of process in an I to transact business in the Commonwage in its mailing address.	ntity is a foreign insure accept service of proce by proceeding based or	er with a certificate of ess on its behalf and n a cause of action arising
6. This application will be effect	ve upon filing.		
I declare under penalty of perjur	y under the laws of Kentucky that the f	orgoing is true and corr	rect.
Samuelo dil	Seymour Lie	oman	01.02.2025
Signature of Authorized Represe	ntative Printed Name		Date