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Michael G. Adams Kentucky Secretary of State Received and Filed: 8/8/2022 12:46 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 Withdrawa (Foreign Business Entity)	al	WFE
	S 14A - 030 the undersigned applies fo d, for that purpose, submits the followin		rawal on behalf of the
1. The name of the business en	tity is Subway Development of (The name must be identical to the	of the Midwest, L	<u>LC</u> ne Secretary of State.)
2. The state or country of format	_{ion is} Indiana		
3. The Secretary of State may for	orward to the business entity at the follo I commits to notify the Secretary of Stat		
325 Sub Way	Milford	CT	06461
Street Address (No Post Office Bo	x Numbers) City	State	Zip Code
in the Commonwealth or pursuar from the commissioner of the De 5. The business entity revokes the the Secretary of State as its ager	ne authority of its registered agent to ac nt for service of process in any proceedi business in the Commonwealth. The b niling address.	tity is a foreign insurer cept service of proces ing based on a cause	with a certificate of authority so on its behalf and appoints of action arising during the
I declare under penalty of perjury	under the laws of Kentucky that the fo	rgoing is true and corr	ect.
By we	Ben Wells		8/2/22
Signature of Authorized Represen	tative Printed Name		Date