# F02000005209

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#### **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: DISSOLUTION	
DOCUMENT NUMBER: Pozooo los	+199
The enclosed Articles of Dissolution and fee are submi	tted for filing.
Please return all correspondence concerning this matter	to the following:
MEHDI MOSHAASHAEE  (Name of Contact Pers	on)
PALATIAL IN VEST MENTS (Firm/Company)	Jò C
19543 ESTUARY BR (Address)	
Bo ca RATON F1. (City/State and Zip C	3349 8 ode)
For further information concerning this matter, please c	all:
MEHDI MOSHRASHAEで at ( Contact Person) (A	Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\bigcup\$\$43.75 Filing Fee & \$\bigcup\$	al copy is Certified Copy
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 3, 2006

MEHDI MOSHAASHAEE PALATIAL INVESTMENTS, INC. 19543 ESTUARY DR BOCA RATON, FL 33498

SUBJECT: MEDCO ENTERPRISES, INC.

Ref. Number: F02000005209

We have received your document for MEDCO ENTERPRISES, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Articles of Dissolution to dissolve a Florida domestic corporation have been submitted in error. A withdrawal application must be filed to withdraw the authority of a foreign corporation in Florida.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette
Document Specialist

Letter Number: 106A00058501

Phesise rature your document, along With a docy of this tother, within 80 days of this later, within 80 days of the little to the character sal.

#### **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: MEDCO ENTERPRISES INC (Name of Corporation)
DOCUMENT NUMBER: F62 0000 5209
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MEHAL MOSHAR SHARE
(Name of Person)
MEDCO ENTERPRISES INC
10733 ROWND BROOK CIR
19543 - STEATH PR
(Address)
Rakigh N.C. 27617
(City/State and Zip code)

For further information concerning this matter, please call:

MEHDI MOSHRASHAEE at (919) 475-0843
(Name of Person) (Area Code & Daytime Telephone Number)

### **MAILING ADDRESS:**

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

# STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

MEDCO ENTERPRISES INC. (Name of Corporation)			
	TALLAH	2006 NO	
T-0200005209	>5	_<	-17
(Document Number of Corporation (if known)	RY SSEI	6	
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VA.	<b>©</b> €	<u>~</u>	
(Incorporated Under Laws of)	ATE RIDA	6.1	

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:

10733 BOUND	(Mailing Address)	 	, र १ <del>० १<u>८ च</u>.</del>
RALuib N	C. 27617 (City/ State /Zip)	 	, <del></del>

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 (Date)

MEHO MOSHANSHAEE PLES.

(Typed or printed name of person signing)

(Title of person signing)

**FILING FEE \$35**