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## **COVER LETTER**

TO:	Amendment Section
	Division of Corporations
SUBJE	ECT: Richard E. Siegfried Architect, Inc.
	(Name of Corporation)
DOCU	MENT NUMBER: F03000005875
The end	closed withdrawal application and fee are submitted for filing.
	return all correspondence concerning this to the following:
	Becky Skolaris
•	(Name of Person)
	RSA Architects
	(Firm/Company)
	18 North Main Street
	(Address)
	Chagrin Falls, OH 44022
	(City/State and Zip code)
For fur	ther information concerning this matter, please call:
Becky Sl	at (440 ) 247-3990 .
	(Name of Person) (Area Code & Daytime Telephone Number)

### **STREET ADDRESS:**

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

### **MAILING 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

Richard E. Siegfried Architect, Inc.

(Name of Corpora	
	ration (if known)
F03000005875	<b>7</b> 90
(Document Number of Corpor	ration (if known)
	<b></b>
Ohio	
(Incorporated Under	Laws of)
This corporation is no longer transacting business or conductivoluntarily surrenders its authority to transact business or con-	-
This corporation revokes the authority of its registered age appoints the Department of State as its agent for service of pretime it was authorized to transact business or conduct affairs i	ocess based on a cause of action arising during the
The following is a current mailing address for the corporation	:
18 North Main Street	
(Mailing Addre	ss)
Charrie Falls OH 44022	
Chagrin Falls, OH 44022 (City/ State /Zi	p)
The corporation agrees to notify the Department of State in th	
// Cleman	6/17/09
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
Richard E. Siegfried	President
(Typed or printed name of person signing)	(Title of person signing)

**FILING FEE \$35**