FO 5000006889

(Re	equestor's Name)	
(Ac	idress)	
(Ad	idress) .	
(Ci	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: SP Tarantino Insurance Brokerage (Name of Corporation)	INE
DOCUMENT NUMBER: FOS 00000 6889	
The enclosed withdrawal application and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Elsa Wong (Name of Person)	
(Name of Person)	
SP Tarantino Insurance Broke (Firm/Company)	erage; luc
490 JEFFERSON St (Address)	
(Address)	
San Franciso CA 9410	9
(City/State and Zip code)	,
For further information concerning this matter, please call:	
Naucy Marazt at (630) 694 - 5 (Name of Person) (Area Code & Daytime	280
(Name of Person) (Area Code & Daytime	Telephone Number)
MAILING ADDRESS: STREET A	DDRESS:

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

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

Name of Corporation)	
(Name of Corporation)	
F05 00000 6889	
105 0000 C65	trees
(Document Number of Corporation (if known)	_
S N CO	_
(Incorporation is no longer transacting business or conducting affairs within the State of Florida and here	П
(Incorporated Under Laws of)	
RA C	
Dr. F	_
This exposures is no longer damageding outsitess of conducting distants within the state of 1 fortunated field	by
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 a appoints the Department of State as its agent for service of process based on a cause of action arising during t time it was authorized to transact business or conduct affairs in Florida.	
The following is a current mailing address for the corporation:	
490 JESSETSON S+ (Mailing Address)	
(Mailing Address)	
Sau Francisco CA 94109	
(City/ State /Zip)	
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)	
(Signature of a director, president or other officer - if in the hands of a (Date) receiver or other court appointed fiduciary, by that fiduciary)	
North Not and the second	
Onald P Tarantino President (Typed or printed name of person signing) (Title of person signing)	
(Typed or printed name of person signing) (Title of person signing)	

FILING FEE \$35