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COVER LETTER

TO:	Amendment Section Division of Corporations			
SUBJECT: BT Property Development, Inc.				
•	(Name of Corporation)			
DOCI	MENT NUMBER: F06000003156			
The er	closed withdrawal application and fee are submitted for filing.			
	return all correspondence concerning this to the following:			
· · · · ·	Lisa Granskie for Incorp Services, Inc.			
(Name of Person)				
Incorp Services, Inc.				
(Firm/Company)				
375 N Stephanie St., Suite 1411				
(Address)				
Henderson, NV 89014-8909				
	(City/State and Zip code)			
For fu	rther information concerning this matter, please call:			
Lisa	Granskie at (702) 866-2500			
	(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

BT Property Development, Inc.

,	(Name of Corporation)		
F0600000315	i6 .		
100000010	(Document Number of Corporation	(if known)	
Nevada		₹ ⁵ € *	
Nevaua	(Incorporated Under Laws	of)	
This corporation revokes the appoints the Department of S	r transacting business or conducting a hority to transact business or conduct a e authority of its registered agent in State as its agent for service of process	affairs in Florida. Florida to accept service on its based on a cause of action arisin	s behalf and
	sact business or conduct affairs in Flo ailing address for the corporation:	rica.	å: 19:
PO BOX 4005	551		
÷. ·	(Mailing Address)		
Las Vegas, N			E STEP
	(City/ State /Zip)	11 12 12 12 12 12 12 12 12 12 12 12 12 1	သ နှစ်
The corporation agrees to no	tify the Department of State in the fut	are of any change in its mailing a	ddress.
Ve //CC		07/09/10	
(Signature of a director pres receiver or other court app	sident or other officer - if in the hands of a ointed fiduciary, by that fiduciary)	(Datc)	
Robert Tracy		President	
(Typed or printed n	ame of person signing)	(Title of person signing)	

FILING FEE \$35