

F08000003212

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

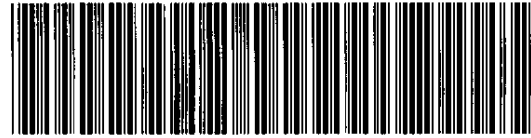
(Business Entity Name)

(Document Number)

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FILED
2010 JUN 21 AM 9:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

withdrawal

TB

JUN 22 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: JUSTINE PAIONE USA INC
(Name of Corporation)

DOCUMENT NUMBER: FO8000003212

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DEVINA SARAFF
(Name of Person)

JUSTINE PAIONE USA INC
(Firm/Company)

178-36 WEXFORD TERRACE, SUITE 3H
(Address)

JAMAICA ESTATES, NY 11432
(City/State and Zip code)

For further information concerning this matter, please call:

K R MEHTA, CPA at (516) 663-5990
(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**

JUSTINE PAINE (USA) INC.
(Name of Corporation)

FO8000003R12
(Document Number of Corporation (if known))

STATE OF DELAWARE
(Incorporated Under Laws of)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

178-36 WEXFORD TERRACE SUITE 3H
(Mailing Address)

JAMAICA ESTATES NY 11432
(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

Ⓢ Devina Saraff
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

06/15/10
(Date)

DEVINA SARAFF
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)

FILING FEE \$35