F1000000119

(Requestor's Name)
*
•
(Address)
(1.1631.555)
(Address)
(City/State/Zip/Phone #)
, , , , ,
PICK-UP . WAIT MAIL
(Business Entity Name)
(Document Number)
The state of the s
Certified Copies ' Certificates of Status
Special Instructions to Filing Officer:

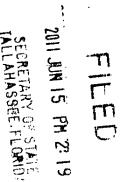
Office Use Only



500208699425

Withdrawal

06/15/11--01012--001 **35.00



102 le 111

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: P.T. Service of Iowa Corporation a/k/a P.T. Service Corporation		
(Name of Corporation)		
DOCUMENT NUMBER: F10000002119		
The enclosed withdrawal application and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Jennifer Hodge		
(Name of Person)		
Dickinson, Mackaman, Tyler & Hagen, P.C.		
(Firm/Company)		
2805 Eastern Avenue		
(Address)		
Davenport, IA 52803		
(City/State and Zip code)		
For further information concerning this matter, please call:		
Jennifer Hodge at (563) 323-9314		
(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

P.T. Service of Iowa Corporation a/k/a P.	T. Service Corporation
(Name of Corporation)	
F10000002119	if known)
(Document Number of Corporation (if known)
	SS 5
lowa	Mc R
(Incorporated Under Laws o	0 7.
	79
This corporation is no longer transacting business or conducting at voluntarily surrenders its authority to transact business or conduct a	•
This corporation revokes the authority of its registered agent in appoints the Department of State as its agent for service of process time it was authorized to transact business or conduct affairs in Flor	based on a cause of action arising during the
The following is a current mailing address for the corporation:	
807 West Kimberly Road	
(Mailing Address)	
Davenport, IA 52806	
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the future (Signature of director, president or other officer - If in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	re of any change in its mailing address. (Date)
Barry W. Shoulders (Typed or printed name of person signing)	President (Title of person signing)
(1) ped or primed mine or person signing)	(i nie oi peraon aigning)

FILING FEE \$35