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COVER LETTER

	Amendment Section Division of Corporations		,		
SUBJE	CT. MIKE DE BRIE S.A.S	SIMPLIFII	ED STOCK CORPORATION		
SCEC		(Name of Corp	······································		
DOCU	MENT NUMBER: F1100000	2042			
The enc	losed withdrawal application and	fee are submitted	l for filing.		
	eturn all correspondence concerning the following:	g this	•		
	Gillian Beach Cieri				
		(Name of Perso	on)		
	(Firm/Company)				
	817 34th Street				
		(Address)			
	West Palm Beach, Florida	a 33407			
	(0	City/State and Zip	code)		
For furth	her information concerning this mat	tter, please call:			
Gillian	1	at (561	₎ 6026600		
	(Name of Person)		ea Code & Daytime Telephone Number)		
	MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327		STREET ADDRESS: Amendment Section Division of Corporations Clifton Building		
	Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

MIKE DE BRIE S.A.S SIMPLIFIED ST	
(Name of Corporation)	
F11000002042	
(Document Number of Corporation	ı (if known)
WISCONSIN	
(Incorporated Under Laws	of)
This corporation is no longer transacting business or conducting voluntarily surrenders its authority to transact business or conduct	
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 Floring in the conduct affairs in Floring in the corporation of the corporatio	s based on a cause of actionalising during the
The following is a current mailing address for the corporation:	P
817 34TH STREET	
(Mailing Address)	
WEST PALM BEAC, FLORIDA 33407	*
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the fut	ure of any change in its mailing address.
-travallin	MAY 19, 2011
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
PIERLUIGI DI CIERI	VICE-PRESIDENT
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35