

F95000003048

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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withdrawal

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04 JAN 15 AM 10:42

DEPARTMENT OF REVENUE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

04 JAN 15 AM 11:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DR  
1/15/04



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 395493 5019639

AUTHORIZATION : *Patricia Pigute*

COST LIMIT : \$ 35.00

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ORDER DATE : January 14, 2004

ORDER TIME : 10:08 AM

ORDER NO. : 395493-020

CUSTOMER NO: 5019639

CUSTOMER: Ms. Eileen Lamela  
Jones Retail Corporation  
Nine West Plaza  
1129 Westchester Avenue  
White Plains, NY 10604-3529  
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FOREIGN FILINGS

NAME: A.S.L. RETAIL OUTLETS, INC.

XX CORPORATE

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd - EXT# 2940

EXAMINER: \_\_\_\_\_

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

A.S.L. Retail Outlets, Inc.

(Name of Corporation)

(Document Number of Corporation (if known))

Delaware

(Incorporated Under Laws of)

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:

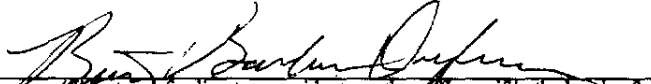
c/o Jones Retail Corpo., Attn: Legal, 1129 Westchester Avenue

(Mailing Address)

White Plains, New York 10604

(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 receiver or other court appointed fiduciary, by that fiduciary)

JANUARY 13, 2004  
(Date)

Beth Barban Dorfsman

(Typed or printed name of person signing)

Secretary

(Title of person signing)

**FILING FEE \$35**

FILED  
04 JAN 15 AM 11:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA