

F96000001619

CT CORPORATION

CORPORATION(S) NAME

HBC Florida, Inc.

0

02 FEB 11 PM 4:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

02 FEB 11 PM 3:24
DIVISION OF CORPORATION

RECEIVED

- | | | |
|--|--|---|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Nonprofit | <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Foreign | <input checked="" type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Other |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Change of RA |
| <input type="checkbox"/> LLC | <input type="checkbox"/> Name Registration | <input type="checkbox"/> UCC |
| <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> Photocopies | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem |
| <input type="checkbox"/> Call When Ready | <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait |
| <input type="checkbox"/> Mail Out | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |

Name _____ 2/11/02
 Availability _____
 Document _____
 Examiner _____
 Updater _____
 Verifier _____
 W.P. Verifier _____

Order#: 5096447
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 -02/12/02--01004--001
 *****35.00 *****35.00

Ref#: _____

Amount: \$ _____

660 East Jefferson Street
 Tallahassee, FL 32301
 Tel. 850 222 1092
 Fax 850 222 7615

C. Coulliette FEB 11 2002

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

HBC Florida, Inc. _____
(Name of Corporation)

Delaware _____
(Incorporated Under Laws Of)

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02 FEB 11 PM 4:28
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 to which the Department of State may mail a copy of any process against this corporation that may be served on the Department.

3102 Oak Lawn Avenue, Suite 215 _____
(Mailing Address)

Dallas, TX 75219 _____
(City/ State /Zip)

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

David Gerow _____ Vice President
Signature Title

David Gerow _____ 2/6/02
Typed or printed name Date