MAY-04-2004 15/01 C CORPORATION
Division of Corporations

Florida Department of State
Division of Corporations

P.01 Page 1 of 1

Electronic Filing Cover Sheet

Public Access System

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H040000981963)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Tọ :

Division of Corporations

Fax Number

: (850)205-0380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)222-9428

WITHDRAWAL OF FOREIGN CORPORATION

AUTOZONE, INC.

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 02      |
| Estimated Charge      | \$35.00 |

Macking Manus

Compared Filling

Public Assess Hills.

5/4/04

5/4/04

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

| UŢOZONE, INC.   |                                     |                   |
|---|-------------------------------------|-------------------|
| (Name of Corporation  | )                                   |                   |
| EVADA   |                                     |                   |
| (Incorporated Under Law   | s Of)                               |                   |
| his corporation is no longer transacting business or conducting a<br>cluntarily surrenders its authority to transact business or conduc   |                                     | orida and hereby  |
| his corporation revokes the authority of its registered agent in F. ppoints the Department of State as its agent for service of processme it was authorized to transact business or conduct affairs in Fl | is based on a cause of action       |                   |
| he following is a current mailing address for the corporation:  |                                     |                   |
| O BOX 2198, DEPT 8088, MEMPHIS, TN 38101  | -9842                               |                   |
| (Mailing Address)   |                                     |                   |
|   |                                     |                   |
|   | · · · · · · · · · · · · · · · · · · |                   |
| (City/State/Zip)  |                                     |                   |
|   |                                     |                   |
| he corporation agrees to notify the Department of State in the fu   | ture of any change in its ma        | iling address.    |
| 1   |                                     | •                 |
| Steen Struck  | VP OF TAX                           |                   |
| Signature of the chairman or vice chairman of the board, president, or any officer, or if the corporation is in the hands of a receiver, trustee, or other court-appointed fiduciary, by that fiduciary.  | Title                               |                   |
| •   |                                     | OF HEALT OF STATE |
| LARRY HARDY   | _ 3/26/04                           | 三 美               |
| Typed or printed name   | Date                                | 350 -             |
|   |                                     | 岩 2               |
|   |                                     | 7.0 =             |
|   |                                     | SE 1              |
|   |                                     |                   |