739802

Remiestor's Name



CORPORATE BENEFIT SERVICES OF AMERICA, INC.

10159 Wayzata Boulevard Minnetonka, MN 55305-1503 600002436846--C -02/20/98--01105--013 *****35.00 *****35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

I	(Corporation Name)	(Doc	cument #)	
2	(Corporation Name)		cument #)	
3	(Corporation Name)	(Doc	cument #)	
4	(Corporation Name)	(Do	cument #)	
☐ Walk in ☐ Mail out		ne Photocopy	☐ Certified Copy ☐ Certificate of Statu	us
NEW FILINGS	AME	NDMENTS:		
Profit	Amend	Amendment		9.8 9.8
NonProfit	Resign	Resignation of R.A., Officer/Director		
Limited Liability	Chang	Change of Registered Agent		TEB 20
Domestication	Dissol	To		
Other	Merge	Merger		
Annual Report Fictitious Name Name Reservation	Foreig Limite	ed Partnership	JRIO A	STATE 8. 48

Other

Examiner's Initials

De zfrif

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS
IN FLORIDA
ABI Administrative Services Corporation (Name of Corporation)
(Name of Corporation)
ABI Administrative Services Corporation (Name of Corporation) Minnesota (Incorporated Under Laws Of)
(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 to which the Department of State may mail a copy of any process against this corporation that may be served on the Department.
171.50
10159 Wayzata Blvd. (Mailing Address)
(Maining Address)
Minnetonka, MN 55305-1503 (City/State/Zip)
(City/ State /Zip)
The corporation agrees to notify the Department of State in the future of any change in its mailing address.
1616 1 m 1/1/
Signature Title
// Digitative 11de

Clifford M. Koltes
Typed or printed name