F99000003050

| (Re | questor's Name) | |
|---|-------------------|-------------|
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| (Ad | dress) | |
| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
| | | |
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Office Use Only



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12/19/07--01019--022 **35.00





COVER LETTER

| | Amendment Section Division of Corporations | | |
|----------|---|---------------------|---------------------------|
| SUBJE | ECT: TLG Leg (Name of | JOINE, | Inc. |
| | (Name o | f Corporation) | |
| DOCU | ument number: F9900 | 0003050 | <u> </u> |
| The end | nclosed withdrawal application and fee are su | omitted for filing. | |
| | return all correspondence concerning this to the following: | | |
| | James P (Name) | Malart. | Щ |
| | (Name o | of Person) | |
| | | | |
| | (Firm/C | Company) | |
| | 13901 5000 | ion Park | Dr. S. |
| | | | |
| | JACKSONVILL (City/State | € , FL | 32224 |
| | (City/State | and Zip code) | |
| For furt | rther information concerning this matter, please | call: | |
| 7 | (Name of Person) | 904) | 424-2880 |
| | (Name of Person) | (Area Code & | Daytime Telephone Number) |
| | | | |

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

| TLG LENDENS, INC. |
|---|
| (Name of Corporation) |
| |
| (Document Number of Corporation (if known) |
| (Document Number of Corporation (if known) |
| |
| (Incorporated Under Laws of) |
| (Incorporated Under Laws of) |
| |
| This corporation is no longer transacting business or conducting affairs within the State of Florida and hereb |
| 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 its behalf an |
| appoints the Department of State as its agent for service of process based on a cause of action arising during tr |
| time it was authorized to transact business or conduct affairs in Florida. |
| The following is a current mailing address for the corporation: |
| |
| 13901 Sitton Park Dr., S. |
| (Mailing Address) |
| |
| JACKSONVILLE FL 32224 |
| (City/ State /Zip) |
| |
| The corporation agrees to notify the Department of State in the future of any change in its mailing address. |
| |
| 12/17/07 |
| (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) (Date) |
| |
| NATHAN N. BURNS LICE PLESTAENT |
| (Typed or printed name of person signing) (Title of person signing) (Title of person signing) |

FILING FEE \$35