813206

(Requ	estor's Name)	
		•
(Addre	ess)	
(Addre	\a_m\	
(Addie	:55)	
(City/S	State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Busin	ess Entity Nar	ne)
,	•	,
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(5004)	ment Number,	
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		
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COVER LETTER

TO: Amendment Section Division of Corporat	
SUBJECT: Northwest A	Airlines, Inc
	(Name of Corporation)
DOCUMENT NUMBER:	813206
The enclosed withdrawal a	pplication and fee are submitted for filing.
Please return all corresponde matter to the following:	ence concerning this
Cyndi Hardt	
	(Name of Person)
Delta Air Lines,	Inc
	(Firm/Company)
PO Box 45852	
	(Address)
Atlanta, GA 30	0320
	(City/State and Zip code)
For further information cond	cerning this matter, please call:
Cyndi Hardt	at (404) 715-5013
(Name of Per	

STREET ADDRESS:

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

MAILING 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

Northwest Airlines, Inc.	
(Name of Corporat	tion)
813206	
(Document Number of Corpora	ation (if known)
Minnesota	
(Incorporated Under I	aws of)
This corporation is no longer transacting business or conduct voluntarily surrenders its authority to transact business or cond	
This corporation revokes the authority of its registered ager appoints the Department of State as its agent for service of pro- time it was authorized to transact business or conduct affairs in	ocess based on a cause of action arising during the
The following is a current mailing address for the corporation:	
PO Box 45852	
(Mailing Addres	s)
Atlanta, GA 30320	
(City/ State /Zip))
The corporation agrees to notify the Department of State in the	
	12/31/09
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
Jan M. Davidson	Assistant Secretary
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35