## 857020

(Re	equestor's Name)	
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## TRANSMITTAL LETTER

FO: Amendment Section Division of Corporations
SUBJECT: Pat Rayers Associates, Inc. (Name of corporation)
DOCUMENT NUMBER:
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
John E. Rogers (Name of Person)
Pat Rogers Associates, (no (Firm/Company)
805.8th Street, Suite 4567 (Address)
Minneapolis, MN 55402 (City/State and Zip code)
For further information concerning this matter, please call:
De Arter at (6/3) 333-8866 (Name of Person) at (6/3) 333-8866 (Area Code & Daytime Telephone Number)
STREET ADDRESS: MAILING ADDRESS:

Amendment Section Division of Corporations 409 E. Gaines St. Tallahassee, FL. 32399 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL. 32314

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

857020	·- <u>-</u>	
(Document Number of Corporation (if known)		
Minnesota (Incorporated Under Laws of)		
This corporation is no longer transacting business or conducting affairs within the State of Floric voluntarily surrenders its authority to transact business or conduct affairs in Florida.	ia and	hereby
This corporation revokes the authority of its registered agent in Florida to accept service on a appoints the Department of State as its agent for service of process based on a cause of action arisine it was authorized to transact business or conduct affairs in Florida.		
The following is a current mailing address for the corporation:		
80 S. 8th Street, Swite 4567	14 S0	SEALC SECALC
(Maning Address)	7 =	漢語   ベスポ
Minneapolis, MN 55402 (City/State/Zip)	P	CREE STOLE
(City/ State /Zip)		7.00 7.00 7.00 7.00 7.00 7.00 7.00 7.00
	l: 32	TICH:
The corporation agrees to notify the Department of State in the future of any change in its mailing	addres	ss.
The Noyu 5/13/05		
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 E. Rogers (Typed or printed name of person signing)  President (Title of person signing)		
FILING FEE \$35		

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