| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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800215481798

Withdrawal

01/24/12--01017--023 **70.00



ASR 1/24/12

COVER LETTER

| TO: Amendment Section Division of Corporations | | | | | |
|---|--|--|--|--|--|
| SUBJECT: MegaPath Inc. | | | | | |
| (Name of Corporation) | | | | | |
| DOCUMENT NUMBER: F00000000870 | | | | | |
| The enclosed withdrawal application and fee are submitted for filing. | | | | | |
| Please return all correspondence concerning this matter to the following: | | | | | |
| Schula Hobbs | | | | | |
| (Name of Person) | | | | | |
| MegaPath Inc. | | | | | |
| (Firr | n/Company) | | | | |
| 50 Barnes Park North, Suite 104 | | | | | |
| (Address) | | | | | |
| Wallingford, CT 06492 | | | | | |
| (City/State and Zip code) | | | | | |
| For further information concerning this matter, please call: | | | | | |
| Schula Hobbs | _{t (} 203 ₎ 284-6276 | | | | |
| (Name of Person) | (Area Code & Daytime Telephone Number) | | | | |
| MAILING ADDRESS: Amendment Section | STREET ADDRESS: Amendment Section Division of Corporations | | | | |
| Division of Corporations P.O. Box 6327 | Clifton Building | | | | |
| Tallahassee, FL 32314 | 2661 Executive Center Circle | | | | |

Tallahassee, FL 32301

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

| MegaPath | | | , |
|--|--|--|---|
| | (Name of | Corporation) | · 表 5 不 |
| F0000000 | | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| | (Document Number o | of Corporation (if known) | 85EE |
| Delaware | | | 2:00 |
| - | (Incorporate | d Under Laws of) | Ď. |
| appoints the Departmentime it was authorized to The following is a current | nt of State as its agent for service transact business or conduct ent mailing address for the corp | ce of process based on a affairs in Florida. | accept service on its behalf and a cause of action arising during the |
| 2220 0 10 | oole Avenue (Mailin | g Address) | |
| San Jose | , CA 95131 | State /Zip) | · |
| The corporation agrees | to notify the Department of Sta | ate in the future of any o | change in its mailing address. |
| $\langle \rangle$ | tor, president or other officer - if in the har | | 12/28/11 (Date) |
| | glas A. Carlen phited name of person signing) | | Secretary (Title of person signing) |

FILING FEE \$35