# F00000001105

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### TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: J. E.J. COMO, JR., TNC., (Name of corporation)
DOCUMENT NUMBER: F00000001105
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JoHN Corro, JR. (Name of Person)
J. P.J. COMO, JR., INC. (Firm/Company)
69 DOUGLAS DRIVE (Address)
Towaco, N. J. 07082-1545 (City/State and Zip code)
For further information concerning this matter, please call:
JOHN COMO, JR. at (201) 404-9732
(Name of Person) (Area Code & Daytime Telephone Number)

### STREET ADDRESS:

Amendment Section Division of Corporations 409 E. Gaines St. Tallahassee, FL. 32399

MAILING ADDRESS:
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

Name of Corporation)
(Name of Corporation)
FOOOOOOIIOS B
(Document Number of Corporation (if known)
NEW JERCEY TO THE TOTAL PROPERTY OF THE TOTA
(Incorporated Under Laws of)
This corporation is no longer transacting business or conducting affairs within the State of Biorida 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 for the corporation:
69 DOUGLAS DRIVE
(Mailing Address)
Towaco, N. J. 07082-1545
(City/ State /Zip)
The corporation agrees to notify the Department of State in the future of any change in its mailing address.
The corporation agrees to hothly the pepartment of state in the future of any change in its maining address.
2/11/2005
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)  (Date)
receiver of other court appointed fiducially, by that fiducially)
(Typed or printed name of person signing)  (Typed or printed name of person signing)
(Types of printed mails of person aigning)

**FILING FEE \$35**