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1/18

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: CROSS LEASING CO INC (Name of corporation)
(Name of corporation)
DOCUMENT NUMBER: <u>F0000001483</u>
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
N. RICHARD GRASSAND (Name of Person)
(Name of Person)
(Firm/Company)
3132 NW 6300 ST (Address)
(Address)
BOCA RATION, FL 33496
(City/State and Zip code)
For further information concerning this matter, please call:
SAME at (561) 241-9435
(Name of Person) at (561) 241-9435 (Area Code & Daytime Telephone Number)
STREET ADDRESS: Amendment Section MAILING ADDRESS: Amendment Section

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

CROSS LEASING Company, INC.
(Name of Corporation) //
F 0000001483 (Document Number of Corporation (if known)
(Document Number of Corporation (if known)
(Name of Corporation) F 000001483 (Document Number of Corporation (if known) NEW JERSEY (Incorporated Under Llaws of)
This corporation is no longer transacting business or conducting affairs within the State of Florida 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:
3132 NW 63 ND ST (Mailing Address)
BOCA RATOW, FL 33496 (City/State/Zip)
The corporation agrees to notify the Department of State in the future of any change in its mailing address. (Signature of a director, president or other officer - if in the hands of a (Date)
W. Ricitars Grassano Predictory (Typed or printed name of person signing) (Title of person signing)

FILING FEE \$35