F0000000 2079

(Re	equestor's Name)	
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02/18/08--01010--005 **35.00

COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: NC Ventures, Inc.			
	ne of Corporation)		
DOCUMENT NUMBER: FOOOO	002079		
The enclosed withdrawal application and fee are	e submitted for filing.		
Please return all correspondence concerning this matter to the following:			
Tracy Weakley			
(Nai	ne of Person)		
NC Ventures, Inc.			
(Fir	m/Company)		
PO Box 1068			
	(Address)		
Stafford, TX 77497			
(City/State and Zip code)			
For further information concerning this matter, pl	ease call:		
David Noirot	at (281) 265-5328 x316		
(Name of Person)	(Area Code & Daytime Telephone Number)		
MAILING ADDRESS: Amendment Section Division of Corporations	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building		

P.O. Box 6327 Tallahassee, FL 32314

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

(Name of Corporation)

NC Ventures, Inc.

	CORE TO SEE
F0000002079 (Document Number of Corporation (i	TARY OF STAT
(Document Number of Corporation (i	if known)
_	FLOOR FLOOR
Texas (Incorporated Under Laws of	
(massperant sines and a	,
This corporation is no longer transacting business or conducting af voluntarily surrenders its authority to transact business or conduct at	
This corporation revokes the authority of its registered agent in I appoints the Department of State as its agent for service of process time it was authorized to transact business or conduct affairs in Flori	based on a cause of action arising during the
The following is a current mailing address for the corporation:	
PO Box 1068	
(Mailing Address)	
Stafford, TX 77497	
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the futur	re of any change in its mailing address.
	2/6/08
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary), by that fiduciary)	(Date)
Tracy Weakley	CFO / SVP
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35