

## Florida Department of State

Division of Corporations Public Access System

**Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000169735 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax:Number : (850)205-0380

Account Name : CORPORATION SERVICE COMPANY Account Number : 120000000195
Phone : (850)521-1000

Fax Number ; (850)558-1575

## LUTION OR WITHDRAWAL

LENONE, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

6/29/2006

LENOne, Inc.

\*\*\*\*

#06C 016973

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

(Mails of Corporation)	
770000000110	ļ
(Document Number of Corporation (if known)	96
ŢĒ	§ T
Virginia	29
(Incorporated Under Laws of)	
• • • • • • • • • • • • • • • • • • • •	1 🕮
This corporation is no longer transacting business or conducting affairs within the State of Floridate voluntarily surrenders its authority to transact business or conduct affairs in Florida.	diedon i i i i i i i
This corporation revokes the authority of its registered agent in Florida to accept service on its appoints the Department of State as its agent for service of process based on a cause of action arising	behalf and the state of
The following is a current mailing address for the corporation:	ha fetta vir n in nyram an opsi
8400 Normandale Lake Boulevard, Suite 250	840, ( 1-, 3-,
(Mailing Address)	
Minneapolis, MN 35437	_ Address of the Addr
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the future of any change in its mailing add	iress.
(Signature of a director, president of other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)  (Date)	
DOWN Flavin (Typed or printed name of person signing)  Vice President CFC (Typed or printed name of person signing)	)

**FILING FEE \$35**