(Requestor's Name) (Address) (Address)	100046519221
(City/State/Zip/Phone #)	02/15/0501030001 **35.0 MELVRY OF STATE ALACKEE, FLORIDA
Office Use Only	,

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TRANSMITTAL LETTER

TO: Amendment Section **Division of Corporations**

Hello Travel CORP. SUBJECT:

DOCUMENT NUMBER: F00000003385

The enclosed withdrawal application and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

EMIL MANFIREDOWIA (Name of Person) Hello Travel CORP (Firm/Company) 2 Bennett Ave 3rd Diloor (Address) New York NY 10033 (Citu/State and Zin code)

For further information concerning this matter, please call:

EMILOLANFREDONIAat (212)928-4480(Name of Person)(Area Code & Daytime Telephone Number) STREET ADDRESS: MAILING ADDRESS: Amendment Section Amendment Section Division of Corporations **Division of Corporations** 409 E. Gaines St. P.O. Box 6327 Tallahassee, FL. 32399 Tallahassee, FL. 32314 gent

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

Travel Corp. DOCUMENT Number of Corporation (if known) NOW YOLK (Incorporated Under Laws 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:

2 Bennett Ave 3rd Dr/00r

New York NY 10033 (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 receiver or other court appointed fighciaty, by that fiduciary) Zenka odger

or printed name of person

(Date)

FILING FEE \$35