F0000002990

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Nefertari INC.
(Name of corporation)
DOCUMENT NUMBER: <u>F0000000 2990</u>
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following: 4000045341842
Barbara Beasky -09/17/0101099022 *****35.00 *****35.00
Nefertari Inc
(Firm/Company)
(Address)
Davic, FC 3333/ (City/State and Zip code)
For further information concerning this matter, please call: Baybaya Beasky at (954) 252.0164 (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



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

Arizona
(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:
6220 SW 158th WAY (Mailing Address)
Davie + 2 33331 (City/ State /Zip)
The corporation agrees to notify the Department of State in the future of any change in its mailing address. **Product Department of State in the future of any change in its mailing address.** **Signature of the chairman or vice chairman of the board, president, or any officer, or if the corporation is in the hands of a receiver, trustee, or other court-appointed fiduciary, by that fiduciary. **Barbara Beasley** Typed or printed name** **Date** *