7822 Allen Rob Sarasota, Flor	ertson Place ida 34240	
City/State/Zip	Phone #	

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Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.		-i 0	
า	(Corporation Name)	(Document #)	71
2.	(Corporation Name)	(Document #)	39.9 9.9
ر. 1	(Corporation Name)	(Document #)	94
+.	(Corporation Name)	(Document #)	· -
	□ Walk in □ Pick up time □ Mail out □ Will wait	Certified Copy Photocopy Certificate of Status	
1	NEW FILINGS	AMENDMENTS	_
	Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	ous E
<u>(</u>	OTHER FILINGS	REGISTRATION/QUALIFICATION	2-
ָ [Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other	

CR2E031(7/97)

Examiner's Initials

T BROWN FEB 2 5 2002

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

IN FEORIDA	
70 P	
SAFERFOODS COPPORATION ZER PO	-
SAFERFOODS CORPORATION (Name of Corporation) STATE OF NEW JERSEY (Incorporated Under Laws Of)	Ş
Fig. 3	
STATE OF NEW JERSEY (Incorporated Under Laws Of)	ニ
(Incorporated Under Laws Of)	
This corporation is no longer transacting business or conducting affairs within the State of Florid	а
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 i	
behalf and appoints the Department of State as its agent for service of process based on a cause of	ΣŢ
action arising during the time it was authorized to transact business or conduct affairs in Florida.	
776 - 6.11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
The following is a current mailing address to which the Department of State may mail a copy of an	y
process against this corporation that may be served on the Department.	
Mailing Address)	
(Mailing Address)	
SARASOTA FL. 34240 (City/ State /Zip)	
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the future of any change in its mailin	σ
address.	5
Signature of the chairman or vice chairman of the board, Title	
president, or any officer.	,
EVELIO J. SARDINA 2/15/02	
EVELIO J. SARDINA 2/15/02 Typed or printed name Date	
-^K F	