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COVER LETTER

	nendment Section vision of Corporations
SUBJEC	T: Poseidon Resources Corporation
	(Name of Corporation)
DOCUM	ENT NUMBER: F00000003906
The enclo	sed withdrawal application and fee are submitted for filing.
	urn all correspondence concerning this he following:
_	Elizabeth Foley
	(Name of Person)
	Poseidon Resources Corporation
_	(Firm/Company)
	1055 Washington Boulevard
_	(Address)
	Stamford, CT 06901
_	(City/State and Zip code)
For furthe	r information concerning this matter, please call:
	Elizabeth Foley at (_203) 327-7740
	(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

- Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

MAILING ADDRESS:

Amendment Section
Division of Corporations
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

Poseidon Reso	ources Corporation (Name of Corporation)	 	OT HAR SECRE	11
F0000003906			ASSEE	
(Docum	nent Number of Corporation	(if known)	STAT FLORI	
Delaware			DA DA	
	(Incorporated Under Laws	of)		
This corporation revokes the authority of appoints the Department of State as its age time it was authorized to transact business. The following is a current mailing address. 1055 Washingt	f its registered agent in ent for service of process or conduct affairs in Flo	n Florida to accept serves based on a cause of ac		
	(Mailing Address)			
Stamford, CT	06901			
•	(City/ State /Zip)			
The corporation agrees to notify the Department of a director, president or other offic receiver or other court appointed fiduciary, b	cer - if in the hands of a	ure of any change in its March 5, 200 (Date))7	SS.
Andrew P. Kir	ıgman	CFO		
(Typed or printed name of person sign	ing)	(Title of pers	son signing)	