F0000004192

Jimothy Bridges 840 NE 20 DR. Wilson Manoes, FL 33305

Requester's Name

500005023355--5 -02/27/02--01034--001 ******35.00 ******35.00

Office Use Only

CORPORATION NAME(S) & DOCU	MENT NUMBER(S), (if known):	02 MAR		
(Corporation Name)	(Document #)	R I 4 PM		-
(Corporation Name) 3.	(Document #)	STATE FLORIDA		
(Corporation Name)	(Document #)		-	
4(Corporation Name)	(Document #)			
☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait		ed Copy cate of Status		
NEW FILINGS	AMENDMENTS			
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/D Change of Registered Agent Dissolution/Withdrawal Merger	Director		
OTHER FILINGS	REGISTRATION/QUALIFICAT	<u> FION</u>		
Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other			

CR2E031(7/97)

Examiner's Initials PS = //62 |

Ros withdrawaf /

PS 3/15/02 |



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 1, 2002

TIMOTHY BRIDGES 840 NE 20 DR WILTON MANORS, FL 33305

SUBJECT: RAINBOW NETWORKING INC.

Ref. Number: F00000004192

We have received your document for RAINBOW NETWORKING INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A foreign corporation authorized to transact business or conduct its affairs in Florida may withdraw its authority by completing the enclosed withdrawal application and submitting the appropriate fee.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6957.

Pamela Smith Corporate Specialist Amendment Section

Letter Number: 602A00012622



RAINBOW NETWORKING INC. (Name of Corporation)	
(Name of Corporation)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
CHAMPAIFN COUNTY FLLINOIS (Incorporated Under Laws Of)	
(Incorporated Under Laws Of)	
This corporation is no longer transacting business or conducting affairs within and hereby voluntarily surrenders its authority to transact business or conduct at This corporation revokes the authority of its registered agent in Florida to behalf and appoints the Department of State as its agent for service of process action arising during the time it was authorized to transact business or conduct a	affairs in Florida. accept service on its sbased on a cause of
The following is a current mailing address to which the Department of State mapping process against this corporation that may be served on the Department.	
840 NE ZO# DR.	MAR III
(Mailing Address)	
SHONE ZO LA DR. (Mailing Address) WILTON MANORS FL 33305 (City/ State /Zip)	FLORIDA
The corporation agrees to notify the Department of State in the future of any address. Signature of the chairman or vice chairman of the board, Title president, or any officer.	change in its mailing
Typed or printed name Typed or printed name Typed or printed name	2
Typed or printed name /Date	