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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-1000

Fax Number : (850) 558-1515

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CRETARY OF STATE

LLAHASSEE, FLORIO

DISSOLUTION OR WITHDRAWAL CALPINE EASTERN CORPORATION

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COVER LETTER

| TO: Amendment Section Division of Corporat | |
|--------------------------------------------------------|----------------------------------------------|
| SUBJECT: Calpine Eas | tern Corporation |
| | (Name of Corporation) |
| DOCUMENT NUMBER: | F0000006908 |
| The enclosed withdrawal a | pplication and fee are submitted for filing. |
| Please return all corresponde matter to the following: | ence concerning this |
| | (Name of Person) |
| Corporation Ser | vice Company |
| | (Firm/Company) |
| 1201 Hays Stree | et |
| | (Address) |
| Tallahassee, FL | 32301 |
| | (City/State and Zip code) |
| For further information conc | erning this matter, please call: |
| Linda De La Cerda | at (925) 557-2266 |
| (Name of Pers | |
| STREET AD | DDRESS: MAILING ADDRESS: |

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Calpine Eastern Corporation

F00000006908

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

(Name of Corporation)

| | (Document Number | of Corporation (i | f known) | | |
|-------------------------------------------------|---------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------|----------------|--------|
| Delaware | | | | | |
| | (Incorporate | ed Under Laws of |) | | |
| This corporation is no voluntarily surrenders i | longer transacting business or ts authority to transact busines | conducting after some some conduct af | fairs within the State of fairs in Florida. | Florida and l | hereby |
| appoints the Departmen | tes the authority of its registent of State as its agent for service transact business or conduct | ice of process b | ased on a cause of actio | | |
| The following is a curre | ent mailing address for the corp | poration: | 77 | gad. | |
| 717 Texas | Avenue, suite 1000 | | | | |
| | (Mailir | ng Address) | | | , EIL, |
| Houston, T | X 77002 | | | 9 A | |
| | (City/ | State /Zip) | | 9. 5. 5. 5. | |
| The corporation agrees | to notify the Department of Sta | ate in the future | of any change in its ma | ailing address | |
| (Signature of a direct receiver or other con | or, president or other officer - if in the har art appointed fiduciary, by that fiduciary) | nds of a | (Date) | | _ |
| Scott L.B. Me | Laughlin | | Assistant Secretar | y | |
| (Typed or pri | nted name of person signing) | | (Title of person s | signing) | |
| | | | | | |

FILING FEE \$35