

F000000007015

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

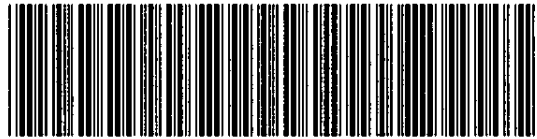
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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

Withdrawal  
CUIS  
@ 4.9.09

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** PHILIP MORRIS LATIN AMERICA SALES CORP  
(Name of Corporation)

**DOCUMENT NUMBER:** F00000007015

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

TOM LANE  
(Name of Person)

PMI GLOBAL SERVICES INC  
(Firm/Company)

120 PARK AVENUE 6TH FLOOR  
(Address)

NY, NY, 10017  
(City/State and Zip code)

For further information concerning this matter, please call:

TOM LANE at (917) 663-3311  
(Name of Person) (Area Code & Daytime Telephone Number)

**MAILING ADDRESS:**

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

**STREET 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

PHILIP MORRIS LATIN AMERICA SALES CORP.  
(Name of Corporation)

F 00000007015

(Document Number of Corporation (if known))

DELAWARE

(Incorporated Under Laws of)

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DIVISION OF CORPORATIONS  
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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:

120 PARK AVENUE , 6TH FLOOR  
(Mailing Address)

NEW YORK , NY 10017  
(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

[Signature]  
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

3/24/09  
(Date)

THOMAS LANE

(Typed or printed name of person signing)

MANAGER TRC

(Title of person signing)

FILING FEE \$35