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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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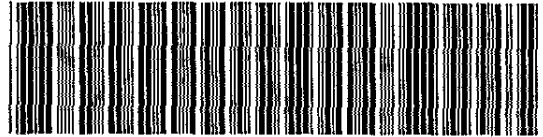
(Business Entity Name)

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DIVISION OF CORPORATIONS
06 APR -3 AM 10:20

Rs 4/10/06
with

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ADP Graphic Communications, Inc.
(Name of Corporation)

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this
matter to the following:

Ronald Scherr, CPA
(Name of Person)

Campo & Scherr, L.L.C.
(Firm/Company)

35 Green Pond Road
(Address)

Rockaway, New Jersey 07866
(City/State and Zip code)

For further information concerning this matter, please call:

Harvey Moy at (201) 217-1990 ext. 5214
(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**

ADP GRAPHIC COMMUNICATIONS, INC.

(Name of Corporation)

(Document Number of Corporation (if known))

NEW JERSEY

(Incorporated Under Laws of)

FILED
STATE
SECRETARY OF CORPORATION
DIVISION OF CORPORATION
06 APR -3 AM 10:20

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:

CGI NORTH AMERICA, INC - 100 BURMA RD

(Mailing Address)

JERSEY CITY, NJ 07305

(City/ State /Zip)

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

X *Harvey Moy*
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

3/17/06
(Date)

HARVEY MOY

(Typed or printed name of person signing)

CFO

(Title of person signing)

FILING FEE \$35