

F01000000589

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

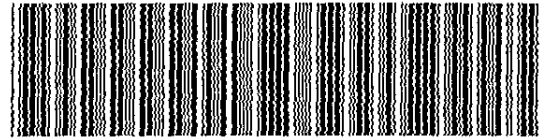
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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O X B O W   C O R P O R A T I O N

1601 Forum Place, Suite 1202  
West Palm Beach, FL 33401

December 30, 2002

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

**Re:   Koch Crime Institute, Inc. – No. F01000000589**

Dear Sir/Madam:

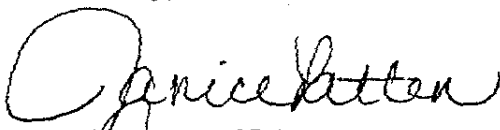
Enclosed is an original and one copy of Application by Foreign Corporation for Withdrawal of Authority to Transact Business withdrawing the above non-stock entity in Florida. Also enclosed is our check in the amount of \$43.75 representing payment for the following:

Filing Fee	\$ 35.00
Certified copy	<u>8.75</u>
Total:	\$ 43.75

All annual report fees have been paid to date and we have been advised this date that no additional fees other than the above are due at this time. However, if the enclosed amount is incorrect and more is owed, please call me collect at **561-640-8833** and I will remit any balance due by credit card. Please return a stamped certified copy to my attention as soon as the filing has been processed.

Thank you for your assistance.

Sincerely,

  
Janice Patten, CLA

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** KOCH CRIME INSTITUTE, INC.  
(Name of corporation)

**DOCUMENT NUMBER:** F01000000589

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

Please return all correspondence concerning this  
matter to the following:

Janice C. Patten

(Name of Person)

c/o Oxbow Corporation

(Firm/Company)

1601 Forum Place  
Suite 1202

(Address)

West Palm Beach, FL 33401

(City/State and Zip code)

For further information concerning this matter, please call:

Janice C. Patten

(Name of Person)

at ( 561 ) 640-8833

(Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**

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

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

KOCH CRIME INSTITUTE, INC.

\_\_\_\_\_  
(Name of Corporation)

Delaware

\_\_\_\_\_  
(Incorporated Under Laws Of)

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:

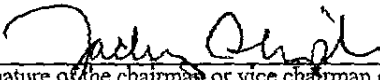
1601 Forum Place, Suite P2

\_\_\_\_\_  
(Mailing Address)

West Palm Beach, FL 33401

\_\_\_\_\_  
(City/ State /Zip)

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

  
\_\_\_\_\_  
Signature of the chairman or vice chairman of the board,  
president, or any officer, or if the corporation is in the hands of a  
receiver, trustee, or other court-appointed fiduciary, by that fiduciary.

Treasurer

\_\_\_\_\_  
Title

Zachary Shipley

12/30/02

\_\_\_\_\_  
Typed or printed name

\_\_\_\_\_  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA