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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: Cooley Incorporated			
	(Name of Corporation)		
DOCUMENT NUMBER: F010000	01015		
The enclosed withdrawal application an	d fee are submitted for filing.		
Please return all correspondence concernimatter to the following:	ng this		
Claudio Silva			
	(Name of Person)		
Cooley Incorporated			
(Firm/Company)			
50 Esten Ave			
(Address)			
Pawtucket, RI 02860			
(City/State and Zip code)			
For further information concerning this matter, please call:			
Claudio Silva	at (401) 724-9000		
(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

Cooley Incorporated	
(Name of Corporation)	
F01000001015	
(Document Number of Corporation (if I	known)
State of Florida	
(Incorporated Under Laws of)	
This corporation is no longer transacting business or conducting affavoluntarily surrenders its authority to transact business or conduct affa	irs in Florida.
This corporation revokes the authority of its registered agent in Floappoints the Department of State as its agent for service of process basime it was authorized to transact business or conduct affairs in Florida.	sed on a cause of action arising during th
The following is a current mailing address for the corporation:	AR -6
50 Esten Ave	ूं इ ग
(Mailing Address)	PHIZ: 31 OF STATE FLORID,
Pawtucket, RI 02860	· · · · · · · · · · · · · · · · · · ·
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the future	of any change in its mailing address.
(Signature of a director, president or other officer - if in the hands of a	2/16/07 (Date)
receiver or other court appointed fiduciary, by that fiduciary)	· -
P. Robert Siener, Jr. (Typed or printed name of person signing)	Chairman
(1 yped of printed name of person signing)	(Title of person signing)

FILING FEE \$35