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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

APPROYEL AND FILES



#### **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: AMERICAN HOME PARTNERS, INC.		
(Name of Corporation)		
DOCUMENT NUMBER: F01000004072		
The enclosed withdrawal application and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
ROBIN L PIVIROTTO		
(Name of Person)		
AMERICAN HOME PARTNERS, INC.		
(Firm/Company)		
1154 HIGHLAND AVENUE		
(Address)		
CHESHIRE, CT 06410		
(City/State and Zip code)		
For further information concerning this matter, please call:		
ROBIN L PIVIROTTO at ( 203 ) 699-3563		
(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

AMERICAN HOME PARTNERS, INC.

(Name of Corporation	on)		
F01000004072			
(Document Number of Corporat	ion (if known)		
DELAWARE (Incorporated Under La	tws of)		
` ·	,		
This corporation is no longer transacting business or conducting voluntarily surrenders its authority to transact business or conducting to the condu		ı and h	ereby
This corporation revokes the authority of its registered agent appoints the Department of State as its agent for service of proc time it was authorized to transact business or conduct affairs in	ess based on a cause of action arisin		
The following is a current mailing address for the corporation:	TALL AH	₩ FEB	
1154 HIGHLAND AVENUE	ASA SA		
(Mailing Address)	) जिल् सिक्	TP.	
CHESHIRE, CT 06410	OR I	6: O	;
(City/ State /Zip)	P		
The corporation agrees to notify the Department of State in the	future of any change in its mailing a	ddress.	
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	Dannand 11, 20	<u>10                                    </u>	<del>_</del>
ROGER J. KRYSTOPA	VP & TREASURER		
(Typed or printed name of person signing)	(Title of person signing)		

**FILING FEE \$35**