F01000005249

| (Rec | questor's Name) | |
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| (Add | iress) | |
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| (City | /State/Zip/Phone | · #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bus | iness Entity Nam | ne) |
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DIVISION OF CERFORATION:

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TRANSMITTAL LETTER

| TO: Amendment Section Division of Corporations |
|---|
| SUBJECT: TMG FINAUCIAL, INC (Name of corporation) |
| DOCUMENT NUMBER: F0/00005249 |
| The enclosed withdrawal application and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| NANCY HESSE ((Name of Person) THE MEDVE GROUP, INC (Firm/Company) |
| 8390 DelMAR BIND. FIRST Floor (Address) ST. Louis, MO 63124 |
| (City/State and Zip code) |
| For further information concerning this matter, please call: |
| NANCY Hossel at 34 569 - 0004 EKT 104 (Name of Person) (Area Code & Daytime Telephone Number) |
| STREET ADDRESS: MAILING ADDRESS: |

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

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

| TM & FINANCIAL, INC (Name of Corporation) |
|---|
| |
| (Document Number of Corporation (if known) |
| (Document Number of Corporation (if known) |
| Missour (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: |
| 8390 DEIMAR BIVD. FIRST Floor |
| STLOUIS MO 63/24 STLOUIS MO 63/24 STLOUIS MO 63/24 |
| The corporation agrees to notify the Department of State in the future of any change in its mailing address of |
| (Signature of a decetor president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) |
| NANCY HeSSE (SECRETARY (Typed or printed name of person signing) (Title of person signing) |
| FILING FEE \$35 |