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(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: DONALD MARTIN, CDT DENTAL STUDIO INC. (Name of Corporation)	
DOCUMENT NUMBER: <u>F01000006075</u>	
The enclosed withdrawal application and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
DONALD MARTIN (Name of Person)	
(Name of Person)	
(Firm/Company)	
3291 ANZA STREET (Address)	
(Address)	
Melbourne, Fl. 32940	
(City/State and Zip code)	
For further information concerning this matter, please call:	
A NNE MAR + IN at (321) 241 - 408 / (Area Code & Daytime Telephone Number) Enclosed is a check for the amount:	
\$35 Filing Fee \$43.75 Filing Fee & \$43.75 Filing Fee & \$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified (Additional copy is Enclosed)	ed)
MAILING ADDRESS: Amendment Section Amendment Section	

Division of Corporations

Tallahassee, FL. 32301

2661 Executive Center Circle

Division of Corporations

Tallahassee, FL.32314

P.O. Box 6327

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

DONALD MARTIN, CDT DENTAL STUDIO INC. (Name of Corporation)			
FOI 00000 6075 (Document Number of Corporation (if known)			
MASS BOK USE SHS (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. As of 9/30/16			
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:			
Melbourne, Fl 32940 Melbourne, Fl 32940 (City/ State /Zip)			
Melbourne, Fl 32940 (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 receiver or other court appointed fiduciary, by that fiduciary) (Date)			
ANNE MARTIN Sec ITREAS (Typed or printed name of person signing) (Title of person signing)			