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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: HANA HOU INC.			
(Name of corporation)			
DOCUMENT NUMBER: NOT KNOWN			
The enclosed withdrawal application and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
MARK A. SKVORETZ, CPA			
(Name of Person)			
WASACZ & SKVORETZ LTD.			
(Firm/Company)			
7550 LUCERNE DRIVE, #400			
(Address)			
MIDDLEBURG HEIGHTS, OHIO 44130			
(City/State and Zip	code)		
For further information concerning this matter, please call:			
MARK A. SKVORETZ at (440	) 239-1911		
(Name of Person) (Are	ea Code & Daytime Telephone Number)		
STREET ADDRESS:	MAILING ADDRESS:		
Amendment Section	Amendment Section		
Division of Corporations 409 E. Gaines St.	Division of Corporations		
Tallahassee, FL. 32399	P.O. Box 6327 Tallahassee, FL. 32314		

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

HANA HOU INC.

(Ivame of Cor	orporation)
NOT KNOWN	
(Document Number of Co	Corporation (if known)
STATE OF OHIO	£51 2.
(Incorporated Un	nder Laws of)
This corporation is no longer transacting business or convoluntarily surrenders its authority to transact business or	
This corporation revokes the authority of its registered appoints the Department of State as its agent for service o time it was authorized to transact business or conduct affa	of process based on a cause of action arising during the
The following is a current mailing address for the corpora	ation:
C/O WASACZ & SKVORETZ LTD., 7550 LUCEF	
(Mailing A	Address)
MIDDLEBURG HEIGHTS, OHIO 44130	
(City/ Stat	ite /Zip)
The corporation agrees to notify the Department of State is	_
(Signature of a director, president or other officer - if in the hands o receiver or other obart appointed fiduciary, by that fiduciary)	of a (Date)
ROBERT JENNINGS	PRESIDENT
(Typed or printed name of person signing)	(Title of person signing)
FILING F	FEE \$35