

F02000000411

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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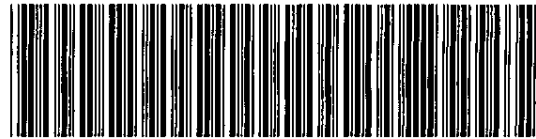
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Withdrawal
03/24/08
DC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Johnson Consulting, Inc.
(Name of Corporation)

DOCUMENT NUMBER: _____

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this
matter to the following:

Dale Johnson

(Name of Person)

Johnson Consulting, Inc.

(Firm/Company)

21 Parliament Lane

(Address)

Woburn, MA 01801-3603

(City/State and Zip code)

For further information concerning this matter, please call:

Dale Johnson

(Name of Person)

at (781) 938-5206

(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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Name of Corporation)

Massachusetts

(Incorporated Under Laws of)

(Mailing Address)

(City/ State /Zip)

3/17/8
(Date)

(Date)

Dale Johnson
(Typed or printed name of person signing)

President
(Title of person signing)

FILING FEE \$35