

F02000002605

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Withhold.
G. Coulletre JAN 18 2005

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Crew one PRODUCTIONS, Inc.
(Name of corporation)

DOCUMENT NUMBER: FO2000002605

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

Please return all correspondence concerning this matter to the following:

Katie Jumper
(Name of Person)

Crew one
(Firm/Company)

5100 TN Ave
(Address)

CHT, TN 37409
(City/State and Zip code)

For further information concerning this matter, please call:

Katie Jumper at (423) 821-0650
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

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

MAILING ADDRESS:

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

Crew One Productions, Incorporated
(Name of Corporation)

FO20000002605
(Document Number of Corporation (if known))

GA
(Incorporated Under Laws of)

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05 JAN 12 PM 2:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

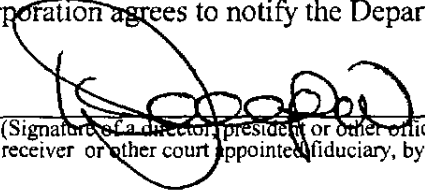
This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address for the corporation:

5700 TN Ave
(Mailing Address)

CHT, TN 37409
(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)

1-10-05
(Date)

Katie Jumper
(Typed or printed name of person signing)

Comptroller
(Title of person signing)

FILING FEE \$35