

F02000002809

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

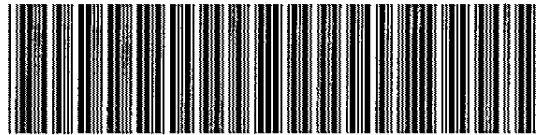
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

Withheld

C. Coulllette AUG 08 2005



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 527453 7401215

AUTHORIZATION :

*Patricia Piquito*

COST LIMIT : \$ 35.00

ORDER DATE : August 5, 2005

ORDER TIME : 9:43 AM

ORDER NO. : 527453-010

CUSTOMER NO: 7401215

CUSTOMER: Mr. Rudy Sanchez  
Mr. Rudy Sanchez  
4739 Maple Avenue

Dallas, TX 75219

FOREIGN FILINGS

NAME: CORUM GROUP, INC.

XX ☐ CORPORATE  
☐ LIMITED PARTNERSHIP  
☐ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY  
XX ☐ PLAIN STAMPED COPY  
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Sara Lea - EXT# 2914

EXAMINER: \_\_\_\_\_

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

CORUM GROUP, INC.

(Name of Corporation)

F02000002809

(Document Number of Corporation (if known))

Delaware

(Incorporated Under Laws of)

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SECRETARY OF STATE  
TALLAHASSEE FL 32399

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:

4739 Maple Ave.

(Mailing Address)

Dallas, TX 75219

(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

Elsa Lopez

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

[Signature]  
(Date)

Elsa Lopez

(Typed or printed name of person signing)

President

(Title of person signing)

**FILING FEE \$35**