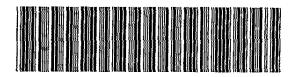
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Quatrotek, Inc. (Name of corporation)	
(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:	
Mariyn) Reed (Name of Person)	-
(Firm/Company)	· .
1163 Rowle 9 (Address)	
Garrison, NY 10524 (City/State and Zip code)	÷
For further information concerning this matter, please call:	
Marilyn Reed at (845) 734-7160 (Name of Person) (Area Code & Daytime Telephone Number)	, .
(Area Code & Daytime Telephone Number) STREET ADDRESS: MAILING ADDRESS:	

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

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

Quatrotek Incorporated
(Name of Corporation)

	F0200000589	36	<u>ـ</u> ـــــــــــــــــــــــــــــــــــ	# [
	F0200058			ASSEE, FLORIU
	New York	Incorporated Under Laws	-	FLG ST
	3	Incorporated Under Laws	of)	ATE DRIDA
	n is no longer transacting be enders its authority to transa			lorida and hereby
appoints the Dep	n revokes the authority of partment of State as its agen orized to transact business o	nt for service of process	based on a cause of action	
The following is	s a current mailing address f	or the corporation:		
	1163 Rte. 9	(Mailing Address)	a garant Maran	
	Garrison, N	(City/ State /Zip)		_
	agrees to notify the Departi		re of any change in its mail	ing address.
Maril (Type	de printed name of person signing)		President (Title of person signi	ing)
		FILING FEE \$35		