# F03000000535

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### **COVER LETTER**

UBJECT: TV	win Peaks Winery Inc.
	(Name of Corporation)
OCUMENT NUMBER:	F0300000535
he enclosed withdrawal ap	oplication and fee are submitted for filing.
Please return all corresponde natter to the following:	ence concerning this
	Elise Baril
	(Name of Person)
	Compliance Agent
	(Firm/Company)
	414 Chinn Street
	(Address)
	Santa Rosa, CA 95404
	(City/State and Zip code)
For further information conc	erning this matter, please call:

#### **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

April 23, 2008

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Twin Peaks Winery Inc. dba Cliff Lede Vineyards

Dear Sir or Madam:

This company does not wish to renew their Authority to Transact Business in Florida. Please cancel their permit effective May 1, 2008. Enclosed are the following:

- 1. Transmittal Letter
- 2. Application by Foreign Corporation for Withdrawal of Authority to Transact Business or Conduct Affairs in Florida
- 3. Copy of Power of Attorney
- 4. \$35 check

If you have any questions, please call me directly at (707) 578-7807.

Sincerely,

Elise Baril Compliance Agent

EB/cb

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

Twin Peaks Winery Inc.	200
(Name of Corporation)	00 92
	Ro Park
F0300000535	72 3400
(Document Number of Corporation (if known)	7
California	OS APR 28 MIL. 53
(Incorporated Under Laws of)	
(medipolation Chart Zame Cr)	
This corporation is no longer transacting business or conducting affairs within the State voluntarily surrenders its authority to transact business or conduct affairs in Florida.	of Florida and hereby
This corporation revokes the authority of its registered agent in Florida to accept ser appoints the Department of State as its agent for service of process based on a cause of actime it was authorized to transact business or conduct affairs in Florida.	
The following is a current mailing address for the corporation:	
1473 Yountville Cross Road	
(Mailing Address)	<del></del>
Yountville, CA 94599	
Yountville, CA 94599 (City/State/Zip)	<del></del>
The corporation agrees to notify the Department of State in the future of any change in its	
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)  (Date	)
Elise Baril Compliance Agent (Typed or printed name of person signing) (Title of per	t/Power of Attorney

#### POWER OF ATTORNEY

I, the undersigned <u>Clifford Lede</u>, <u>President of Twin Peaks Winery Inc dba Cliff Lede Vineyards</u> do hereby appoint Elise Baril as my attorney-in-fact to execute for me on behalf of the Corporation all applications, notices, monthly reports, and other instruments, claims, letters, writings, papers, and to act for me in dealing with the Alcoholic Beverage Control authorities of every state in connection with matters relating to the laws and regulations administered by each. I further authorize the attorney above named to receive on the Corporation's behalf any and all notices, papers, and letters in connection with such matters, and grant her full power and authority to do all that is essential in and about the premises, as fully as I could do if personally present, with full power of substitution and revocation. I hereby ratify and confirm all that the attorney shall lawfully do or cause to be done by virtue of this appointment.

Dated this	day of JUIY 2006
	(signature)
	Clifford Lede, President
	Twin Peaks Winery Inc dba Cliff Lede Vinevards

STATE OF California 1

70

COUNTY OF Napa

On this 20 day of July, 2006, before the undersigned Notary Public in and for the State of Courfornia, duly commissioned and sworn, personally appeared Clifford Lede personally known to me to be President of Twin Peaks Winery Inc dba Cliff Lede Vinevards known to me (or proved on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument, and acknowledged to me that he executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal on the date set forth above.

