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| (Re | questor's Name) | |
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| (Ad | dress) | |
| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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TRANSMITTAL LETTER

| TO: Amendment Section Division of Corporations | | |
|---|--|--|
| SUBJECT: CUBAN (8 | UNECTIDAL MUSIC INC | |
| (Name of corp | oration) | |
| DOCUMENT NUMBER: FO 30008 | 700698 | |
| The enclosed withdrawal application and fee are se | ubmitted for filing. | |
| Please return all correspondence concerning this matter to the following: | | |
| BRUCE | MCLEAN | |
| (Name | MCLEAN of Person) | |
| | | |
| (Firm/ | Company) | |
| 235 W 76' | ddress) | |
| | | |
| New Yor | k NY 18023 and Zip code) | |
| (Vity/State | and Zip code) | |
| For further information concerning this matter, please | se call: | |
| BRUCE MCLEAN at | 646) 269-7007 | |
| (Name of Person) | (646) 269-7007 (Area Code & Daytime Telephone Number) | |
| STREET ADDRESS: | MAILING ADDRESS: | |
| Amendment Section | Amendment Section | |
| Division of Corporations | Division of Corporations | |

P.O. Box 6327

Tallahassee, FL. 32314

409 E. Gaines St. Tallahassee, FL. 32399

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

| Name of Cornoration |
|--|
| (Name of Corporation) |
| |
| FAZ ARANAN GE |
| (Document Number of Corporation (if known) |
| Au G |
| |
| Delawore (Incorporated Under Laws of) |
| |
| High R III |
| |
| 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 revolves the authority of its registered agent in Florida to account agent in Italy 16 |
| This corporation revokes the authority of its registered agent in Florida to accept service on its behalf ar appoints the Department of State as its agent for service of process based on a cause of action arising during the |
| appoints the Department of State as its agent for service of process based on a cause of action arising during if time it was authorized to transact business or conduct affairs in Florida. |
| under was authorized to datisact ousiness of conduct arrains in Provida, |
| The following is a current mailing address for the corporation: |
| |
| (Mailing Address) |
| (Mailing Address) |
| |
| New York NY 18023 |
| New york, 10025 |
| / (City/ State /Zip) |
| |
| The company in a contract with the Department of the industrial for the contract of the contra |
| The corporation agrees to notify the Department of State in the future of any change in its mailing address. |
| \mathcal{L} |
| (Signature of a director, president or other officer - if in the hands of a receiver, or other court appointed fiduciary by that fiduciary by that fiduciary by the fiduciary by |
| (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) (Date) |
| sees. Or or other pointer haustray, of all haustray, |
| |
| Typed or printed name of person signing) (Typed or printed name of person signing) |
| (Typed or printed name of person signing) (Title of person signing) |
| |

FILING FEE \$35