

F03000003240

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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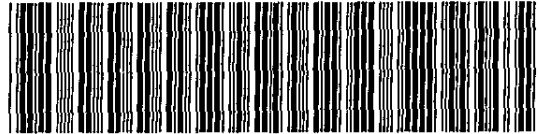
(Business Entity Name)

(Document Number)

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Withdrawal

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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 230945 7360196

AUTHORIZATION : *Patricia Pigato*

COST LIMIT : \$ 35.00

ORDER DATE : March 1, 2005

ORDER TIME : 9:24 AM

ORDER NO. : 230945-005

CUSTOMER NO: 7360196

CUSTOMER: Mr. John Dunlop
Mr. John Dunlop
65 Castlehill View
Kilsyth
Glasgow, -- G65 9NY

FOREIGN FILINGS

NAME: QCS PROPERTY 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: Susie Knight - EXT# 2956

EXAMINER: _____

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

QCS PROPERTY INC.

(Name of Corporation)

F03000003240

(Document Number of Corporation (if known))

DELAWARE

(Incorporated Under Laws of)

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:

PMB 398, 14900 E. ORANGE BLVD,

(Mailing Address)

KISSIMMEE, FL 34747

(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 or in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

2/20/2005

(Date)

JOHN DUNLOP

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILING FEE \$35

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TALLAHASSEE, FLORIDA