F03000003401

(Re	questor's Name)	
(Ad	dress)	
· (Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PiCK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nai	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
ļ		

Office Use Only



400191843534

01/20/11--01005--001 **35.00



3/2/1/

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Interiors AT THE Beach by DONNA, INC. (Name of Corporation)
DOCUMENT NUMBER: F 0300003401
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Dolala Linine VA
DONNA LINDEVAL (Name of Person)
Interiors AT THE Beach by DONNA INC (Firm/Company)
12109 SE 91ST TERRACE (Address)
·
Summer Field FL 3-449/ (City/State and Zip code)
(City/State and Zip code)
For further information concerning this matter, please call:
Name of Person) at (352) 347-4458 (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
MAILING ADDRESS: STREET ADDRESS:

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

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

Interiors AT THE Beach By DONNA, INC (Name of Corporation)
F0300003401 (Document Number of Corporation (if known)
(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:
12/09 SE 9/St TERRACE SO NO
Summer field FL 3449/ 20 20 CCity/ 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 - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) (Date)
DONNA LINGEVAL PRESIDENT (Typed or printed name of person signing) (Title of person signing)

FILING FEE \$35