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Account Name : C T CORPORATION SYSTEM

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## DISSOLUTION OR WITHDRAWAL WILH. WILHELMSEN (USA), INC.

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**C.COULLIETTE** 

SEP 22 2010

9/21/2010

## **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUBJ	ECT: WILH. WILHELMSEN (USA), INC.
	(Name of Corporation)
DOCU	MENT NUMBER: F03000004532
The en	closed withdrawal application and fee are submitted for filing.
	return all correspondence concerning this to the following:
	Thomas Flo
	(Name of Person)
	WILH. WILHELMSEN (USA), INC.
	(Firm/Company)
	9400 NEW CENTURY DRIVE
	(Address)
	PASADENA TX 77507
	(City/State and Zip code)
For fu	ther information concerning this matter, please call:
×	THE VILLENAME TO SEE STATE OF THE STATE OF T
	(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

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

MAILING ADDRESS:
Amendment Section

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

WILH. WILHELMSEN (USA), INC.		
(Name of Corporatio	n)	
F03000004532		
(Document Number of Curporati	on (if known)	
DELAWARE		
(Incorporated Under Lav	vs of)	
This corporation is no longer transacting business or conducting voluntarily surrenders its authority to transact business or conducting		l hereby
This corporation revokes the authority of its registered agent appoints the Department of State as its agent for service of proceeding it was authorized to transact business or conduct affairs in F	ess based on a cause of action arising du	
The following is a current mailing address for the corporation:		+ OF C
9400 NEW CENTURY DRIVE, ATTN: TAX DRPT		ORP ORP
(Mailing Address)		CORPORATI
PASADENA TX 77507 US (City/ State /Zip)		OH'S
(month anthon (mark)		
The corporation agrees to notify the Department of State in the fi	uture of any change in its mailing addres	¥\$.
(Signature of a director, president or other officer - if in the hands of a	T (S) JULI	
receiver or other court appointed flauclary, by that fiduciary)	/ <del>e</del> m/	
Thomas Flo	Secretary	_
(Typed or printed name of person signing)	(Title of person signing)	

FILING FEE \$35