F0300005433

(Req	uestor's Name)	
(Addi	ress)	
(Addı	ress)	
(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nan	ne)
(Doca	ıment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	
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	Office Use Onl	ly



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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Winner a Way elac. (Name of corporation)
DOCUMENT NUMBER: F03000005433
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Person)
Winner's Way clase. (Firm/Company)
13735 C 5. W. 84 th St. (Address)
Mauri, 7.1. 33183 (City/State and Zip code)
For further information concerning this matter, please call:
Hater M. Koch at (305) 386-1165 (Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Amendment Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL. 32399

MAILING ADDRESS:

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

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

Winner's Way lac. (Name of Corporation)			_
(Name of Corporation)	ALLAI	04 A	
F0300005433 (Document Number of Corporation (if known)	HASSE	AUG-9	
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(Incorporated Under Laws of)	JATE DRIDA	59	J

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:

13735 C S.W. 84th St. (Mailing Address)
Mianie, Fl. 33183 (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 - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)
TATIE M. Koch (Typed or printed name of person signing) President (Title of person signing)

FILING FEE \$35