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		•	COVER LETTE	R	15 FEB	To wife the state of the state
TO:		ndment Section ion of Corporations			18	
SUBJ		Chemical Associa	ates of IL, In	C.	729	ان دی چر
			(Name of Corporat	ion)	12 N	9
DOC	UMEN	T NUMBER: 34-1463	707		<del>-</del>	٠
The er	nclosed	withdrawal application and	fee are submitted for	· filing.	,	
		all correspondence concerning following:	g this			
	M	ary D. Turk				
			(Name of Person)			
	C	nemical Associate	es of IL, Inc.		•	
			(Firm/Company)			
	12	270 S. Cleveland I	Massillon Ro	l.		
			(Address)			
	C	opley/Ohio 44321				
		((	City/State and Zip co	de)		
For fu	rther in	nformation concerning this ma	tter, please call:			• -
Ma	ry D	. Turk	<sub>at (</sub> 330	,666-5200 Ex	d:112	•
Enclos	sed is a	(Name of Person) a check for the amount;	(Area C	ode & Daytime Teleph	ione Number)	)
\$35	5 Filing	Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee Certified Copy (Additional copy Enclosed)	\$52.50 Filing F Certificate of S is Copy (Addition	Status & Certi	
		MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327		STREET ADDRE Amendment Section Division of Corpore 2661 Executive Ce	ations	

Tallahassee, FL. 32301

Tailahassee, FL.32314

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

Chemical Associates of IL, Inc.	
(Name of Corporation)	
34-1463707	
(Document Number of Corporation (if known)	
Ohio	
(Incorporated Under Laws of)	
This corporation is no longer transacting business or conducting affairs within voluntarily surrenders its authority to transact business or conduct affairs in Flo	the State of Florida and hereby orida.
This corporation revokes the authority of its registered agent in Florida to a appoints the Department of State as its agent for service of process based on the time it was authorized to transact business or conduct affairs in Florida.	a cause of action arising during
The following is a current mailing address for the corporation:	25 <b>15 FL</b>
1270 S. Cleveland Massillon Rd.	
(Mailing Address)	TH R
Copley/Ohio 44321	F SH 2:
(City/ State /Zip)	9 9 9 P
The corporation agrees to notify the Department of State in the future of any characteristics of a director president or other officer - if in the hands of a receiver or other coun appointed fiduciary, by that fiduciary)	2/5/2./J- (Date)
	etary
(Typed or printed name of person signing)	(Title of person signing)

**FILING FEE \$35**