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(Requestor's Name)		
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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Alcena Design Studo Inc.		
SUBJECT:	(Name of Corporation)	
DOCUMENT NUMBER: F04000000065		
The enclosed withdrawal application and f	fee are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
Valiere Alcena		_
	(Name of Person)	
Alcena Design Studio Inc		_
	(Firm/Company)	
37 Davis Ave	·	
	(Address)	
White Plains, NY 10605		
(C	City/State and Zip code)	15 15
For further information concerning this matter	tter, please call:	19 BEG -
Valiere Alcena	at (914 715-4998	<u>ئے د</u>
(Name of Person)	at (at (Area Code & Daytime Telephone Numb	per) 圣 Richard
Enclosed is a check for the amount:	-	1AIE 1: 32
■ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee, Certified Copy Certificate of Status & Copy (Additional copy is Enclosed)	
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

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

Alcena Designs Studio Inc.		
(Name of Corpora	tion)	
F400000065		
(Document Number of Corpor	ation (if known)	
New York		
(Incorporated Under	aws of)	
This corporation revokes the authority of its registered age appoints the Department of State as its agent for service of protime it was authorized to transact business or conduct affairs in the following is a current mailing address for the corporation	ocess based on a cause of action arising during in n Florida.	
37 Davis Avenue	19 Of 19	
(Mailing Addre	1	
White Plains, NY 10605-1003	p) ## 9	
(City/ State /Zi	7. 3. 3.	
The corporation agrees to notify the Department of State in the	e 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 fiductary, by that fiductary)	(Date)	
Valiere Alcena	President	
(Typed or printed name of person signing)	(Title of person signing)	

FILING FEE \$35

(Typed or printed name of person signing)