a. 8. 2008^{an}10:15AM Page I of I CSC NO. 162 Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document. (((H08000190776 3))) Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page 100 ing no will generate another cover sheet. File 1ster 2 00 RO3 acter this filing To: Division of Corporations Fax Number : (850)617-6380 From: : CORPORATION SERVICE COMPANY Account Name Account Number : I2000000195 Phone : (850)521-1000 Fax Number : (850)558-1575 DISSOLUTION OR WITHDRAWAL TUV RHEINLAND OF NORTH AMERICA, INC. Certificate of Status 0 Certified Copy 0 Page Count 02 Estimated Charge \$35.00 Electronic Filing Menu Corporate Filing Menu Help 8 808 https://efile.sunbiz.org/scripts/efilcovr.exe 8/8/2008

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

		i	
	TUV Rhein	land of North Ar	merica, Inc.
· w -	· ·	(Name of Corporation)	
	_	, i	if known)
	_	04000001276	PSE
	(Document	Number of Corporation (r known)
		, page 6	707
		Delaware	
	(Ir	corporated Under Laws o	\$ \frac{1}{2}
		; }	· · · · · · · · · · · · · · · · · · ·
This corporation is no coluntarily surrenders	longer transacting bus is authority to transact	iness or conducting at business or conduct a	fairs within the State of Florida and her ffairs in Florida.
ppoints the Departme	nt of State as its agent	s registered agent in for service of process to conduct affairs in Flori	Florida to accept service on its behalf based on a cause of action arising during ida.
THO II AND STRUIGHTS OF	A HALLISHOL DUSINESS OF		
the following is a curr	ent mailing address for	the corporation:	•
		, 	_
	12	Commerce Roa	
		(Mailing Address)	
	Manday	l Composition	08470
	Newton	vn, Connecticut	00470
		(City/ State /Zip)	
	•		•
he comoration agrees	to notify the Departm	ent of State in the futur	e of any change in its mailing address.
	i MA	7.	
And	reas Hill	1/_	August 5 , 2008
(Signature of a direct	or, president or other officer- out appointed fiduciary, by the	if in the liands of a	(Date)
received on contact or	i	i !	
Δn	treas Helbig	; ; !	Secretary
(Typed or no	inted name of person signing	<u>'</u>	(Title of person signing)
(19)muce p		΄; '	,
		FILING FEE \$35	·
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