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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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(Business Entity Name)

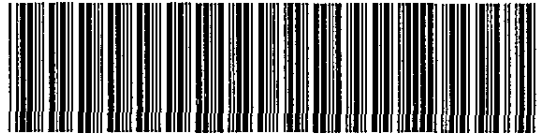
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04 AUG 20 PM 12:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

withdrawal

T BROWN AUG 26 2004

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Swallow Aviation & Investment, Inc.  
(Name of corporation)

DOCUMENT NUMBER: \_\_\_\_\_

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this  
matter to the following:

John Soileau

(Name of Person)

Swallow Aviation & Investment, Inc.

(Firm/Company)

3229 Highway 17

(Address)

Green Cove Springs, FL 32043

(City/State and Zip code)

For further information concerning this matter, please call:

John Soileau

(Name of Person)

at ( 904 ) 284-4021

(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**

Swallow Aviation & Investment, Inc.  
(Name of Corporation)

\_\_\_\_\_  
(Document Number of Corporation (if known))

Delaware  
(Incorporated Under Laws of)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

3229 Highway 17  
(Mailing Address)

Green Cove Springs, FL 32043  
(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)

7-29-04  
(Date)

John Soirau  
(Typed or printed name of person signing)

\_\_\_\_\_  
(Title of person signing)

**FILING FEE \$35**