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SECRETARY OF STATE TALLAMASSEE, FLORIDA TO BE SECRETARY OF STATE TO BE SECRETARY.

OR 5/24/05

CT CORPORATION

May 24, 2005

Department of State, Florida 409 East Gaines Street Tallahassee FL 32399

Re:

Order #: 6370689 SO

Customer Reference 1: Customer Reference 2:

Dear Department of State, Florida:

Please obtain the following:

ITC Financial Licenses, Inc. (DE) Withdrawal Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Connie R Bryan Manager Fulfill Ctr Connie_Bryan@cch-lis.com file 1st

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWALLOFD AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA SECRETARY SECRETARY 3: 32		
AUTHORITY TO TRANSACT BUSINESS O	R CONDUCT AFFAIRS IN FLORIDA	
	ses, Inc. SECRETARY OF STATE TALLAHASSEE, FLORIDA	
ITC Financial Licen	ses, Inc. TALLAHASSES STATE	
(Name of Corpo	ration) FLORIDA	
	, ,	
F04000004016		
(Document Number of Corp		
Delaware		
(Incorporated Unde	r Laws of)	
This corporation is no longer transacting business or condu- voluntarily surrenders its authority to transact business or co-		
This corporation revokes the authority of its registered ag appoints the Department of State as its agent for service of p time it was authorized to transact business or conduct affairs. The following is a current mailing address for the corporation	rocess based on a cause of action arising during the in Florida.	
The following is a current maining audiess for the corporatio	11.	
P. O. Box 510		
(Mailing Add	ress)	
West Point, GA		
(City/ State /2	Zip)	
The corporation agrees to notify the Department of State in t	he future of any change in its mailing address.	
1. 7.7		
Int 18	5/19/2005	
(Signature of a director president couler officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)	
Timothy B. Knight	CFO/Secretary/Treasurer/Director	
(Typed or printed name of person signing)	(Title of person signing)	

FILING FEE \$35