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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Tait & Associates, Inc.
(Name of Corporation)
DOCUMENT NUMBER: F04000004247
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Catherine Bull
(Name of Person)
Tait & Associates, Inc.
(Firm/Company)
P.O. Box 11118
(Address)
Santa Ana, CA 92711-1118
(City/State and Zip code)
For further information concerning this matter, please call:
Catherine Bull at (714) 658-6512
(Name of Person) (Area Code & Daytime Telephone Number)
MAILING ADDRESS: STREET ADDRESS:

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

Tait & Associates, Inc.

(Name of Corporation)	SELLA SELLA
	LAR A
F04000004247	
(Document Number of Corporation (i	f known)
	F 3
California	LOGA
California	
(Incorporated Under Laws of) ; ≯
	-w *
This corporation is no longer transacting business or conducting aff	fairs within the State of Florida and hereby
voluntarily surrenders its authority to transact business or conduct af	fairs in Florida.
This composition revolves the outhority of its resistant accept in E	Novido to accout compies on its habelf and
This corporation revokes the authority of its registered agent in F appoints the Department of State as its agent for service of process b	<u>-</u>
time it was authorized to transact business or conduct affairs in Flori-	
The following is a current mailing address for the corporation:	
P.O. Box 11118	
(Mailing Address)	
Santa Ana, CA 92711-1118	
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the future	e of any change in its mailing address.
	1-10-08 (Date)
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
James D. Streitz	CFO/Treasurer
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35