# F04000005005

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(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
<u> </u>		

Office Use Only



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N

T. Roberts APR 0 5 2016

#### **COVER LETTER**

TO:	Amendment Section Division of Corporations		
SUBJECT: Tim & Deby Contrestano ministries, Inc. (Name of Corporation)			
DOCU	MENT NUMBER: FO 4000005005		
The en	closed withdrawal application and fee are submitted for filing.		
	return all correspondence concerning this to the following:		
	Tim Contrestano		
(Name of Person)			
Tim & Deby Contrestano MinistriEs, Inc (Firm/Company)			
	P.O. Box 175		
	(Address)		
	CLOVIS, CA 93613-0175 (City/State and Zip code)		
For fur	ther information concerning this matter, please call:		
De	Oy Contrestano at (559) 274 - 2606 (Name of Person) (Area Code & Daytime Telephone Number)		

#### STREET ADDRESS:

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

### MAILING ADDRESS: Amendment Section

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

Tim & DBBY Contrestano Ministr	is Incorporate
F0400005005 (Document Number of Corporation (if known)	· · · · · · · · · · · · · · · · · · ·
California USA (Incorporated Under Laws of)	
This corporation is no longer transacting business or conducting affairs within the Sta voluntarily surrenders its authority to transact business or conduct affairs in Florida.	te of Florida and hereby
This corporation revokes the authority of its registered agent in Florida to accept so appoints the Department of State as its agent for service of process based on a cause of time it was authorized to transact business or conduct affairs in Florida.	
The following is a current mailing address for the corporation:	6 APR -1
P. O. Box 145 (Mailing Address)	FILED -4 AM 7: 3 ARY OF STATI SSEE FLORI
CLouis, CA 93613-0175 (City/State/Zip)	NIDA
The corporation agrees to notify the Department of State in the future of any change in i	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)  3-27- (Date of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	06 ate)
Tim Contrestano Preside (Typed or printed name of person signing) Preside	n+ person signing)

**FILING FEE \$35**