F04000005566

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	#)
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· TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations SUBJECT: Immediate Support Services
SUBJECT: Immediate Support Scruces (Name of corporation)
DOCUMENT NUMBER: <u>FO 4000005566</u>
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following: Ms kouch
(Name of Person)
(Firm/Company)
34/19 MAIN Street
(Address)
Jupited, El 33458 (City/State and Zip code)
For further information concerning this matter, please call: 622-7535 CHC M/S August 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

mmediate support services, INC.
(Name of Corporation)

F04000005566 237
(Document Number of Corporation (if known)
DE
(Incorporated Under Laws of)
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:
4179 Main Street (Mailing Address)
(ivialing Address)
Jupiter. Fl 33458 (City/State/Zip)
(City/ State /Zip)
The corporation agrees to notify the Department of State in the future of any change in its mailing address.
The corporation agrees to notify the Department of State in the future of any change in its manning address.
(The Willet
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) (Date)
receiver or other court appointed fiduciary, by that fiduciary)
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leter Wistorich Iresident
(Typed or printed name of person signing) (Title of person signing)

FILING FEE \$35