FOYDOW 3135

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TALLANASSEE, PLOAUM

APR 23 2014 R. WHITE

COVER LETTER

	ndment Section sion of Corporations		
SUBJECT:	Complete Preservatio		•
		(Name of Corporation	1)
DOCUMEN	T NUMBER: F0400000	7135	
The enclosed	d withdrawal application and f	fee are submitted for fi	ling.
Please return matter to the	all correspondence concerning following:	this	
		William Costas	
		(Name of Person)	
	Complete I	Preservation Sys	tems, Inc.
		(Firm/Company)	
	26171	Mountainview E	livd
		(Address)	
	Broo	oksville, FL 3460	2
		ity/State and Zip code	
For further in	nformation concerning this matt	er, please call:	
	William Costas	at (352)	534-0277
Enclosed is a	(Name of Person) a check for the amount:	(Area Cod	e & Daytime Telephone Number)
X \$35 Filing	g Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed)	\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
	MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL.32314		STREET ADDRESS: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL. 32301

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

Complete Preservation Systems,	Inc.
(Name of Corporation)	
F0400007135	
(Document Number of Corporation (if known)	
New York State	
(Incorporated Under Laws of)	
This corporation is no longer transacting business or conducting affairs wit voluntarily surrenders its authority to transact business or conduct affairs in	
This corporation revokes the authority of its registered agent in Florida tappoints the Department of State as its agent for service of process based the time it was authorized to transact business or conduct affairs in Florida.	
The following is a current mailing address for the corporation:	
26171 Mountainview Blvd	MT 6 M
(Mailing Address)	
Brooksville, FL 34602	No. of the second
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the future of any	change in its mailing address.
1/2	4/11/2014
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
William Costas	President
(Typed or printed name of person signing)	(Title of person signing)
	(Date)

FILING FEE \$35