## F05000000517

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(Address)		
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Milharawal Massallo

## **COVER LETTER**

FO: Amendment Section Division of Corporations	
SUBJECT: Happ Enterprises Inc	
(Name of Corporation)	
DOCUMENT NUMBER: F05000000517	
The enclosed withdrawal application and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Craig A Happ	
(Name of Person)	
Happ Enterprises Inc	
(Firm/Company)	
178 Erath Drive	
(Address)	
Rochester NY 14626-1912	
(City/State and Zip code)	
For further information concerning this matter, please call:	
Craig A Happat (585) 225-2427	
(Name of Person) (Area Code & Daytime Telephone Number)	
MAILING ADDRESS:  Amendment Section  STREET ADDRESS:  Amendment Section	

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

Happ Enterprises Inc.

	(Name of Corporation	)
	F05000000517	
	(Document Number of Corporatio	n (if known)
	New York	
	(Incorporated Under Law	s of)
	rporation is no longer transacting business or conducting rily surrenders its authority to transact business or conduc	
appoints	reporation revokes the authority of its registered agent is the Department of State as its agent for service of process was authorized to transact business or conduct affairs in Fig.	ss based on a cause of action arising during the
The foll	lowing is a current mailing address for the corporation:	
	178 Erath Drive	TALL TALL
	(Mailing Address)	AHAN AHAN
	Rochester NY 14626-1912	Service Service
	(City/ State /Zip)	TOMAY -3 PH 3: 05  THE CRETARY FLORIDA  STORY Change in its mailing address
The cor	poration agrees to notify the Department of State in the fu	iture of any change in its mailing address.
	(Signature of a director, president of other officer - if in the hands of a	04/30/2010 (Date)
i	receiver or other court appointed fiduciary, by that fiduciary)	(Date)

**FILING FEE \$35**