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## **COVER LETTER**

TO: Amendment Section Division of Corporations
Division of Corporations  SUBJECT: COOPER COMMONNEE UNION a Delevare Profit Corporation  (Name of Corporation)  Tas a grade of QQ
DOCUMENT NUMBER:
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JAMES R. COONER
(Name of Person)  an individual
(Firm/Company)
2832 PEAVINE TRAIL
(Address)
LAKELAND, FLORIDA 33810-2333
(City/State and Zip code)
For further information concerning this matter, please call:
Jamer R. Cooper at (863) 859-7909
(Name of Person) (Area Code & Daytime Telephone Number)

#### **MAILING ADDRESS:**

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

## **STREET ADDRESS:**

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

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

COOPER COMMONAGE UNION a DELAWARE NON- Profet Corporation)
FO5000002689 (Document Number of Corporation (if known)
(Document Number of Corporation (if known)  STATE OF DELAWARE  (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:
2822 PEAVINE TRAIL (Mailing Address)
LAKELAND, FL. 338/0-2332 (City/State/Zip)
The corporation agrees to notify the Department of State in the future of any change in its mailing address.  (Signature of a director, president opoline officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)  (Typed or printed name of person signing)  (Title of person signing)

FILING FEE \$35