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• (Re	equestor's Name)		
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SECRETARY OF STATE

withdrawal

B 4/25/08

COVER LETTER

TO:	O: Amendment Section		
	Division of Corporations		
SUBJ	ECT: DESIGNWORKS, INC.	•	
		(Name of Corporation)	
DOC	UMENT NUMBER: CERT # 78-80	11980685-9 / PARTNER # 170245	
The e	nclosed withdrawal application an	d fee are submitted for filing.	
	e return all correspondence concernito the following:	ng this	
	CATHERINE KITE, Controller		
		(Name of Person)	
DESIGNWORKS, INC.			
(Firm/Company)			
4900 W. 29TH AVENUE			
		(Address)	
	DENVER, CO 80212		
		(City/State and Zip code)	
For fu	rther information concerning this m	natter, please call:	
CATH	ERINE KITE	at (303) 480-0591 X137	
	(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 Division of Corporations Clifton Building 2661 Executive Center Circle	
	rununussee, r L 32317	Tallahassee, FL 32301	

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

DESIGNWORKS, INC. doing business in Florida as Design works of
DESIGNWORKS, INC. doing business in Florida as Design works of (Name of Corporation) Colorado, Inc.
CERT # 78-8011980685-9 / PARTNER # 170245 F05000004525 (Document Number of Corporation (if known)
COLORADO ECE LA C
(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:
4900 W. 29TH AVENUE
(Mailing Address)
DENVER, CO 80212 (City/ State /Zip)
The corporation agrees to notify the Department of State in the future of any change in its mailing address.
$\mathcal{L}_{\overline{\mathcal{L}}}$
(Signature of a director, president or other officer - if in the hands of a (Date)
receiver or other court appointed fiduciary, by that fiduciary)
LETTY ROZELL PRESIDENT
(Typed or printed name of person signing) (Title of person signing)

FILING FEE \$35