

F05000004992

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COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: Agilera Messaging, Inc.				
(Name of Corporation)				
DOCUMENT NUMBER: F05000004992				
The enclosed withdrawal application and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Kathy L. Brown, Corporate Paralegal				
(Name of Person)				
Affiliated Computer Services, LLC				
(Firm/Compa	ny)			
2828 N. Haskell Avenue, Building 1, 9th Floor				
(Address)				
Dallas, Texas 75204				
(City/State and Zip code)				
For further information concerning this matter, please call:				
Kathy L. Brown at (21	4 ₎ 841-6346			
	rea 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			
	Tallahassee, FL 32301			

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

A	Agilera Messaging, Inc.			
	(Name of Corporation	n)		
F	F05000004992			
	(Document Number of Corporation	on (if known)		
Ç	State of Delaware			
	(Incorporated Under Law	vs of)		
	ration is no longer transacting business or conducting surrenders its authority to transact business or conduc		rida and	l hereby
appoints the	ration revokes the authority of its registered agent is e Department of State as its agent for service of proce authorized to transact business or conduct affairs in F	ss based on a cause of action ar		
The follow	ing is a current mailing address for the corporation:	 P	, 55 Z	. 3.
_2	828 N. Haskell Avenue, Building 1, 9th Floo	or g	7.0	
	(Mailing Address)	च ब्री		- Proper
Γ	Dallas, Texas 75204 (City/ State /Zip)			
	(City/ State /Zip)		35.	
_/	attion agrees to notify the Department of State in the function agrees to notify the Department of State in the function agrees to notify the Department of State in the function agrees to notify the Department of State in the function agrees to notify the Department of State in the function agrees to notify the Department of State in the function agrees to notify the Department of State in the function agrees to notify the Department of State in the function agrees to notify the Department of State in the function agrees to notify the Department of State in the function agrees to notify the Department of State in the function agrees to notify the Department of State in the function agrees to notify the Department of State in the function agrees to notify the Department of State in the function agrees to notify the Department of State in the function agrees to notify the Department of State in the function agrees to notify the Department of State in the function agrees to notify the Department of State in the Indiana agree to notify the Indiana agree	uture of any change in its mailin	_	SS.
J. N	Michael Peffer	Secretary		
	(Typed or printed name of person signing)	(Title of person signi	ng)	

FILING FEE \$35