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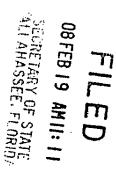
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(Requestor's Name)		
(Address)		
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, <i>,</i>		
(City/State/Zip/Phone #)		
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PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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Certified Copies Certificates of Status		
Certificates of Status		
Special Instructions to Filing Officer:		
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COVER LETTER

TO: Amendment Section Division of Corporations	·	
SUBJECT: The Property Junction, Inc.		
(Name of Corporation)		
DOCUMENT NUMBER: 1=050000 5852		
The enclosed withdrawal application and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Sean Loynd		
(Name of Person)		
N/A		
(Firm/Company)		
PO Box 1302		
(Address)		
Oldsmar FL 34677		
(City/State and Zip code)		
For further information concerning this matter, please call:		
Sean Loynd at (727	420-0482	
	de & 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

Guir Coast Property Group, Inc	
(Name of Co	rporation)
Colorated which is a so	
(Document Number of Co	orporation (if known)
Nevada	
(Incorporated Ur	nder Laws of)
This corporation is no longer transacting business or convoluntarily surrenders its authority to transact business or This corporation revokes the authority of its registered appoints the Department of State as its agent for service of time it was authorized to transact business or conduct affa	conduct affairs in Florida. agent in Florida to accept service on its behalf and if process based on a cause of action arising during the
time it was authorized to transact business or conduct aria	irs in Fiorida.
The following is a current mailing address for the corpora	tion:
PO Box 1302	n:
(Mailing A	ddress)
Oldsmar, FL 34677	AHASS TEB T
(City/ State	
The corporation agrees to notify the Department of State is	n the future of any change in its mailing address.
(Signature of a director, president or other officer - If in the hands of receiver or other court appointed fiduciary, by that fiduciary)	Ta (Date)
Sean Loynd	President
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35