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EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations	
MIDS TECHNOLO	CIES INC
SUBJECT: MIPS TECHNOLO	1.12 ·
· ·	Name of Corporation)
DOCUMENT NUMBER: F060000	00122
The enclosed withdrawal application and fee	e are submitted for filing.
Please return all correspondence concerning the matter to the following:	nis
CANDY CERVANTE	Z
((Name of Person)
IMAGINATION TECH	INOLOGIES, LLC
	(Firm/Company)
3201 Scott Blvd	
	(Address)
Santa Clara CA, 9505	54
_ ·· _ · _ · _ · _ · _ · _ · _ · _ · _	y/State and Zip code)
For further information concerning this matter	
VIVIAN DORFLINGER	at (408) 5305000
(Name of Person) Enclosed is a check for the amount:	(Area Code & Daytime Telephone Number)
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & \$52.50 Filing Fee, Certified Copy Certificate of Status & Certified (Additional copy is Enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations 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

MIPS TECHNOLOGIES, INC. (Name of Corporation)
F0600000122 (Document Number of Corporation (if known)
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:
955 EAST ARQUES
(Mailing Address)
SUNNYVALE, CA, 94085
(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 or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) (Date)
(Typed or printed name of person signing) (Title of person signing)