

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000260838 3)))



H090002608383ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1575

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 DEC 18 PM 2:31

FILED

DISSOLUTION OR WITHDRAWAL
CEEBRAID HOLIDAY MANAGEMENT CORPORATION

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

RECEIVED
2009 DEC 18 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

12-18-09

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

Ceebraid Holiday Management Corporation

(Name of Corporation)

F06000000736

(Document Number of Corporation (if known))

Delaware

(Incorporated Under Laws of)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 DEC 18 PM 2:31

FILED

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:


1801 South Australian Avenue

(Mailing Address)

West Palm Beach, FL 33409

(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

X 
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

12/17/09

(Date)

Adam Schlesinger

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE \$35