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DIVISION OF CORPORATIONS

Wilhdrawallous 19, M.D. D8

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Cobble Hill Center Co	orp
	(Name of Corporation)
DOCUMENT NUMBER: F0600000	1091
The enclosed withdrawal application and	fee are submitted for filing.
Please return all correspondence concerning matter to the following:	g this
Jonathan Easton	
	(Name of Person)
	(Firm/Company)
151 East 31st Street, #11	IB
	(Address)
New York, NY 10016	
(0	City/State and Zip code)
For further information concerning this mat	tter, please call:
Jonathan Easton	at (212) 532 8823
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING-ADDRESS:	STREET-ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tällähassee, FL 32314

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

Cobble Hill Center Corp.
(Name of Corporation)
F0600001091 8 1
(Document Number of Corporation (if known)
New York 3
(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:
P.O. Box 450
(Mailing Address)
Craryville, New York 12521
(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)
TONATHAN EASTON (Typed or printed name of person signing) (Title of person signing)

FILING FEE \$35