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TAIL AHASSEE, FLORID.

COVER LETTER

Amendment Section TO:

Division of Corporations

SUBJECT: HARVEST FRESH CO., INC.

(Name of Corporation)

DOCUMENT NUMBER: F06000001432

The enclosed withdrawal application and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

EDWARD YU

(Name of Person)

THONG, YU, WONG & LEE, LLP, CPAS

(Firm/Company)

8450 GARVEY AVENUE, SUITE 200

(Address)

ROSEMEAD, CA 91770

(City/State and Zip code)

For further information concerning this matter, please call:

EDWARD YU

(Name of Person)

(Area Code & 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

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

HARVEST FRESH CO., INC.

(Name of Corporation)
F0600001432 (Document Number of Corporation (if known)
(Document Number of Corporation (if known)
CALIFORNIA (Incorporated Under Laws of)
(mostporated street zame or,
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:
8450 GARVEY AVENUE, SUITE 200
(Mailing Address)
ROSEMEAD, CA 91770
(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 prother officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) (Date)
CALVIN NGO (Typed or printed name of person signing) PRESIDENT (Title of person signing)

FILING FEE \$35