F000000001555

(Re	equestor's Name)	
(Ad	idress)	
. (Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



100234892881

05/11/12--01011--019 **35.00

DIVISION OF CORPORATIONS
12 HAY 11 PH 1:54

MANAWAI



COVER LETTER

	Amendment Section		
	Division of Corporations CCT: Softbrands Manu	facturing Ir	ne
SUBJE	ECT: Outbrailes Marie	(Name of Corpora	
DOCU	MENT NUMBER: F060000	` .	
	closed withdrawal application and return all correspondence concerning		•
	Tracy Sonterre		
		(Name of Person))
		(Firm/Company)	
	380 St. Peter St.		
	St. Paul, MN 55102	(Address)	
		City/State and Zip co	ode)
For fur	ther information concerning this mat	ter please call:	
	cy Sonterre	at (651	767-6207
Enclose	(Name of Person) ed is a check for the amount:	(Area	Code & Daytime Telephone Number)
\$35	Filing Fee \$\int_\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fe Certified Copy (Additional copy Enclosed)	Certificate of Status & Certified
	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

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

Softbrands Manufacturing, Inc.
(Name of Corporation)
F0600001555 (Document Number of Corporation (if known)
Minnesota (Incorporated Under Laws of)
(Incorporated Under Laws of)
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: 13560 Morris Road, Suite 4100
(Mailing Address)
Alpharetta, GA 30004
(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)
Mark Henry (Typed or printed name of person signing) TREASURER (Title of person signing)