# F06000001693

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C.COULLIETTE
FEB 0.9 2011

**EXAMINER** 

### **COVER LETTER**

TO: Amendment Section Division of Corporations			
SUBJECT: Portage Consulting, Inc.			
(Name of Corporation)			
DOCUMENT NUMBER: F06000001693			
The enclosed withdrawal application and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Teresa D'Amico			
(Name of Person)			
Portage Consulting, Inc.			
(Firm/Company)			
112 North Curry Street			
(Address)			
Carson City, NV 89703			
(City/State and Zip code)			
For further information concerning this matter, please call:			
Teresa D'Amico at (408 ) 861-0510			
(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 FLORIDA

Portage Consulting, Inc.	·
(Name of Corporation)	
F0600001693	
(Document Number of Corporation (i	f known)
State of Novada	
State of Nevada (Incorporated Under Laws of	)
This corporation is no longer transacting business or conducting aff voluntarily surrenders its authority to transact business or conduct af	
This corporation revokes the authority of its registered agent in F appoints the Department of State as its agent for service of process b time it was authorized to transact business or conduct affairs in Florida	pased on a cause of action arising during the
The following is a current mailing address for the corporation:	FEB -
112 North Curry Street	-8 -8 -8 -8 -8 -8 -8 -8 -8 -8 -8 -8 -8 -
(Mailing Address)	7 3
Carson City, NV 89703	
(City/ State /Zip)	545 177
The corporation agrees to notify the Department of State in the future (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	e of any change in its mailing address.  (Date)
Teresa D'Amico	President
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35