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Mitharawal 09-15-09 Dc

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Clarion MortGaße Capital, INC. (Name of Corporation)
DOCUMENT NUMBER: FOLOOOOO2/93
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DAVID MARR (Name of Person)
(Name of Person)
CLARION MORTARE CAPITAL, INC. (Firm/Company)
(Firm/Company)
(Address)
(City/State and Zip code)
For further information concerning this matter, please call:
DAVID MARL at (303) 843-0777 X //02 (Name of Person) (Area Code & Daytime Telephone Number)
(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

(Name of Corporation) (Name of Corporation)	<u>.c.</u>		
Folooooo2193 (Document Number of Corporation (if known)		09 SET	
	ASSET	60	
(Incorporated Under Laws of)	F STATE	H 10: 57	3
This corporation is no longer transacting business or conducting affairs within the State of voluntarily surrenders its authority to transact business or conduct affairs in Florida.	`Florida	a and	hereby
This corporation revokes the authority of its registered agent in Florida to accept service appoints the Department of State as its agent for service of process based on a cause of action time it was authorized to transact business or conduct affairs in Florida.			
The following is a current mailing address for the corporation:			
(Mailing Address)	TE 3	00	
CREENWOOD VILLAGE CO 80/11 (City State /Zip)			
The corporation agrees to notify the Department of State in the future of any change in its m	ailing a	ddres	s.
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) (Date)	7 .		
DAVID L. Mare (Typed or printed name of person signing) (Title of person	signing)	CEO	·

FILING FEE \$35