F060000007500

(Re	equestor's Name)	
(Ad	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	e)
(De	ocument Number)	·
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVEL AND FILED

withdr.

C. Coulliette AUG 0 9 2007

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT:
DOCUMENT NUMBER:
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ANN DE JAGER
(Name of Contact Person)
AMT NORTH AMERICA
(Firm/Company)
PO BOX 953566
(Address)
LAKE MARY FL 32795
(City/State and Zip Code)
For further information concerning this matter, please call:
ANN DE JAGER 1 407, 733 3953
ANN DE JAGER at (407) 733 3953 (Name of Contact Person) (Area Code & DaytimeTelephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) Certificate of Status & Certified Copy (Additional copy is enclosed)

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



CORRECT FORMS & 12/07 FLORIDA DEPARTMENT OF STATE **Division of Corporations**

July 26, 2007

ANN DE JAGER AMT NORTH AMERICA, INC. PO BOX 953566 LAKE MARY, FL 32795

SUBJECT: AMT NORTH AMERICA, INC.

Ref. Number: F06000007500

We have received your document for AMT NORTH AMERICA, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Articles of Dissolution to dissolve a Florida domestic corporation have been submitted in error. A withdrawal application must be filed to withdrawather authority of a foreign corporation in Florida.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette **Document Specialist**

Letter Number: 107A00046745

HAISION OF CORPORATIONS

COVER LETTER

SUBJECT: AMT NORTH AMERICA (Name of Corporation) DOCUMENT NUMBER: The enclosed withdrawal application and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ANN DE JAGER (Name of Person) AMT NORTH AMERICA (Firm/Company) PO BOX 953566 (Address) LAKE MARY FL 32795 (City/State and Zip code) For further information concerning this matter, please call: ANN DE JAGER at (LO7) 733 3953		mendment Section ivision of Corporations
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Amendment Section Amendment Section		(Name of Person) (Area Code & Daytime Telephone Number)
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle		Amendment Section Division of Corporations P.O. Box 6327 Amendment Section Division of Corporations Clifton Building

Tallahassee, FL 32301

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

AMI NORTH AMERICA	PAE OT
(Name of Corporation)	CRETARY
(Document Number of Corporation (if known)	- SEE, F
_	STATE
(Incorporated Under Laws of)	_ P
This corporation is no longer transacting business or conducting affairs within the State of Florida voluntarily surrenders its authority to transact business or conduct affairs in Florida.	and hereby
This corporation revokes the authority of its registered agent in Florida to accept service on its appoints the Department of State as its agent for service of process based on a cause of action arisin time it was authorized to transact business or conduct affairs in Florida.	
The following is a current mailing address for the corporation:	
PO Box 953566	
(Mailing Address) LAKE MARY FL 32795	
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the future of any change in its mailing at Signature of a director, president or other officer - if in the hands of a receiver or other court appointed figliciary, by that fiduciary)	ldress.
ANN DE JAGER TREASURER	

FILING FEE \$35

(Title of person signing)

(Typed or printed name of person signing)