(Requestor's Name)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
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∵ ∴ (Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

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Corporate Filing Transmittal Form

To:	Florida				From:	Cathi J. Wall		
Order #:	CW-SL2	0091671			Date:	Oct 26, 2009		
Target N _uwa US/	Dom Juris FLORIDA							
<u>Attached</u>	for filing,	please fin	d the followin	<u>ıg:</u>				
WITHDR	AWAL/CAI	NCELLATIO	ON FILING					
						·		
Type of S	ervice: me Day	24 H	lour	Routine	Othe	er:		
Please return the original evidence to the following:								
Cathi J. Wall								
National Corporate Services, Inc. 2 Club Centre Court, Suite 5								
	dsville, IL 620							
	<u> </u>							
	Special Instructions/Notes:							
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Please Se Ema			Fax:		dEx:	Mall		
<u> </u>			(618) 656-379	95 L A	:ct #	الالا		
	ntact us a assistance	1	-6274 with an	ıy questions,	probler	ms or delays. Thank you		
• •		,				NATIONA		
re Court, Su	ite 5					NATIONA RECISTERE		





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

Luwa USA, Inc.									
	(Name of Corpo	oration)	PE T						
F07000002771									
(Document Number of Corporation (if known)									
			70. 00						
North Carolina			90 E 55						
	(Incorporated Unde	r Laws of)	<u> </u>						
This corporation is no longer transaction voluntarily surrenders its authority to This corporation revokes the authority appoints the Department of State as its	transact business or co ity of its registered ag	enduct affairs in Florida. gent in Florida to accept	service on its behalf and						
time it was authorized to transact businessed			or action arising during the						
The following is a current mailing add	dress for the corporation	on:							
3901 Westpoint Blv	d., Suite 100								
	(Mailing Add	ress)							
Winston-Salem	NC (C) To	27103							
(City/ State /Zip)									
The corporation agrees to notify the I	Department of State in t	the future of any change i	in its mailing address.						
(Signature of a director, president or oth receiver or other court appointed fiduce	er officer - if in the hands of a ciary, by that fiduciary)		5/09 (Date)						
Lisa Cu	nningham	Tre	asurer						

FILING FEE \$35