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withdrawal

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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: GCS Systems Tnc. (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:		
Dorothy Langley (Name of Person)		
GCS Systems Inc		
(Firm/Company)		
13633 Browley Point Dr (Address)		
(Address)		
Jacksonville FL 32225		
(City/State and Zip code)		
For further information concerning this matter, please call:		
(Name of Person) at (904) 2662 6516 (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

GCS Systems Tree (Name of Corporation)	
(Name of Corporation)	ny apple y
(Document Number of Corporation (if known) ARE ROSSET SET TO SE	
(Incorporated Under Laws of)	ED
This corporation is no longer transacting business or conducting affairs within the State of Florida and voluntarily surrenders its authority to transact business or conduct affairs in Florida.	hereby
This corporation revokes the authority of its registered agent in Florida to accept service on its behappoints the Department of State as its agent for service of process based on a cause of action arising duritime it was authorized to transact business or conduct affairs in Florida.	
The following is a current mailing address for the corporation: () Dorotha Langley 3633 Browley Point Or (Mailing Address)	
Jackson Ville FL 3225 (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 fidudiary, by that fiduciary)	es.
(Typed or printed name of person signing) (Title of person signing)	<u>.</u>

FILING FEE \$35