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### **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: The Collier Organization (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:
Donald Collier (Name of Person)
The Collier Organization (Firm/Company)
135 Triad West Drive
OFallon MD 63366 (City/State and Zip code)
For further information concerning this matter, please call:
Donald Collier at (636) 240 0707
(Name of Person) (Area Code & Daytime Telephone Number)

#### **STREET ADDRESS:**

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

#### **MAILING 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 (Document Number of Corporation (if known) This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida. This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida. The following is a current mailing address for the corporation: 35 Triad West The corporation agrees to notify the Department of State in the future of any change in its mailing address. gradure of a director, president or other officer if in the hand occiver or other court appointed fiduciary, by that fiduciary)

**FILING FEE \$35**