F07000004760

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SREJARY OF STATE WAY OF STATE ANASSEE FLORIDGE AND THE STATE OF ST

COVER LETTER

וט	vision of Corporations
SUBJEC'	T:TOUR MASTER RECREATIONAL VEHICLES, INC.
	(Name of Corporation)
DOCUM	ENT NUMBER:F07000004760
Γhe enclo	sed withdrawal application and fee are submitted for filing.
	urn all correspondence concerning this the following:
	GLENDA FREEL
-	(Name of Person)
	TOUR MASTER RECREATIONAL VEHICLES, INC.
_	(Firm/Company)
	PO BOX 1005
_	(Address)
	NAPPANEE, INDIANA 46550
_	(City/State and Zip code)
For furthe	er information concerning this matter, please call:
GLENDA	FREEL at (574) 773-7761 ext 3371
	(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

	TOUR MASTER RECR			ES, INC	·			
		(Name of	Corporation)					
						.d. D.(0	_	
	F07000004760					- E	80	
-	(Docum	ent Number of	Corporation	(if known)		200 E(0)	43.8 43.8	
						AS A	9	Property.
	INDIANA					383	3>	
-		(Incorporated	Under Laws	of)		777		
						EST ATS	ည ထု	
	oration is no longer transacting by surrenders its authority to trans					of Figirid		hereby
appoints t	oration revokes the authority of he Department of State as its age as authorized to transact business	ent for service	e of process	based on a				
The follow	wing is a current mailing address	for the corpo	oration:					
	PO BOX 1005							
-		(Mailing	g Address)					
	NAPPANEE, IND		46550					
•		(City/ S	tate /Zip)					
The corpo	oration agrees to notify the Depar	tment of Stat	te in the futu	ire of any ch	ange in its	mailing a	addres	SS.
	The -			•	000	00		
/ _	708				8-89	100		
(Si	gnature of a director, president or other office	cer - if in the hand y that fiduciary)	is of a		(Date)			
PI	HILIP S. SARVART			EXECUTI	VE VIC	ב ססבי	SIDE	יאי

FILING FEE \$35

(Title of person signing)

(Typed or printed name of person signing)