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DIVISION OF COMPORATIONS

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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Obama for America	
	of Corporation)
DOCUMENT NUMBER: F0700005040	
The enclosed withdrawal application and fee are su	ibmitted for filing.
Please return all correspondence concerning this matter to the following:	
Mala Adiga	
(Name	of Person)
Obama for America	
(Firm/	Company)
233 N. Michigan Ave., Suite 192	20
	ddress)
Chicago IL 60601	
(City/State	and Zip code)
For further information concerning this matter, pleas	se call:
Mala Adiga at (312) 819-2008
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS:	STREET ADDRESS:
4 C	A

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

Obama for America INC	
(Name of Corporatio	n)
F07000005040	on (if known) on (if known) vs of)
(Document Number of Corporation	on (if known)
Illinois	72
(Incorporated Under Lav	vs of)
This corporation is no longer transacting business or conducting voluntarily surrenders its authority to transact business or conducting to transact business or conducting this corporation revokes the authority of its registered agent appoints the Department of State as its agent for service of procedime it was authorized to transact business or conduct affairs in Figure 1912. The following is a current mailing address for the corporation: 233 N. Michigan Ave., Suite 1920	ct affairs in Florida. in Florida to accept service on its behalf and ess based on a cause of action arising during the
(Mailing Address)	
Chicago, IL 60601	
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the f	uture 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 fiduciary, by that fiduciary)	12/14/08 (Date)
Marianne Markowitz	Secretary
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35