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SECRETARY OF STATE OF CORPORATIONS
OF CORPORATIONS
OF MAR -2 AM 8: 57

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Claimetrics Services Inc. (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:	
Reg Aldrich (Name of Person)	
(Name of Person)	
Claimetrics Services Inc. (Firm/Company)	
(Firm/Company)	
P.O. Box 12475 (Address)	
(Address)	
Oklahoma City, OK 73123 (City/Statevand Zip code)	
For further information concerning this matter, please call:	
Reg Aldrich at (405) 728-5544 x 20 (Name of Person) (Area Code & Daytime Telephone Number)	178

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.

Claimetrics Services, In 5.3 Properties (Name of Corporation)
(Name of Corporation)
(Document Number of Corporation (if known)
(Incorporated Under Laws of)
(Incorporated Under Laws of)
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:
P.O. Box 22475 (Mailing Address)
Oklahoma City OK 73123 (City/State 7Zip)
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 efficer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)
CTyped or printed name of person signing) (Title of person signing)

FILING FEE \$35