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COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: Cooper Aerobics E	Enterprises	, Inc.		
	(Name of Corporat	ion)		
DOCUMENT NUMBER: F080000	00030			
The enclosed withdrawal application and fe Please return all correspondence concerning	e are submitted fo			
Kim Doumen				
(Name of Person)				
Cooper Aerobics Enterprises, Inc.				
(Firm/Company)				
12200 Preston Rd.				
	(Address)			
Dallas,. TX 75230	, ,			
(Ci	ty/State and Zip co	de)		
For further information concerning this matter	r, please call:			
Kim Doumen		560-2711		
(Name of Person) Enclosed is a check for the amount:		Code & Daytime Telephone Number)		
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fe Certified Copy (Additional copy Enclosed)	Certificate of Status & Certified		
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL.32314		STREET ADDRESS: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL. 32301		

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

Cooper Aerobics Enterprises, Ir	nc.		
(Name of Corporation)			
F0800000030			
(Document Number of Corporation (if	known)		
Texas			
(Incorporated Under Laws of)			
This corporation is no longer transacting business or conducting affa voluntarily surrenders its authority to transact business or conduct affa. This corporation revokes the authority of its registered agent in Fl appoints the Department of State as its agent for service of process the time it was authorized to transact business or conduct affairs in F. The following is a current mailing address for the corporation: 12200 Preston Road	fairs in Florida. orida to accept service on its behalf and based on a cause of action arising during		
(Mailing Address)			
DALLAS, TX 75230			
(Ĉity/ State /Zip)			
The corporation agrees to notify the Department of State in the future (Signature of a director, president of other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	of any change in its mailing address. 5/11/12 (Date)		
TESSIE CLASBY (Typed or printed name of person signing)	CONTROLLER (Title of person signing)		

FILING FEE \$35