## FOSDOODOUZT

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Withdrawal 10/31/13

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: VIRTUAL ACCESS PARTNERS, INC. (Name of Corporation)
DOCUMENT NUMBER: FOS 000 000 427
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Marker to the to llowing:  BALBARA NCISON POHS  (Name of Person)  UIRTUAL ACLESS PARTNERS INC.  (Firm/Company)  2108 SOUTHBRIDGE PKWY - SUITE 650  (Address)  SIMMING HOM, AL 35209  (City/State and Zip code)
(Name of Person)
VIRTUAL ACLESS PARTNERS INC.
(Firm/Company)
2100 JONTHBRIDGE PKWY - SAITE 650
(Address)
DIMINGhom, AL 35209
(City/State and Zip code)
For further information concerning this matter, please call:
Name of Person)  (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the amount:
\$35 Filing Fee \$43.75 Filing Fee & \$43.75 Filing Fee & \$52.50 Filing Fee,  Certificate of Status Certified Copy Certificate of Status & Certified  (Additional copy is Enclosed)  Copy (Additional copy is enclosed)
MAILING ADDRESS: STREET ADDRESS:
Amendment Section Amendment Section
Division of Corporations  Division of Corporations  Division of Corporations  2661 Evenutive Center Circle

Tallahassee, FL.32314

Tallahassee, FL. 32301

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

Name of Corporation)
(Name of Corporation)
(Document Number of Corporation (if known)
(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:
2100 Son BLIDGE Phay - Sarre 650
(Mailing Address)
2100 SONTHBUDGE Play - Sattle 650  (Mailing Address)  (Mailing Address)  (City/ State /Zip)
/ (City/ State /Zip)
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 officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)
BALBARA Nelson Potts Pur 10 ent (Title of person signing) (Title of person signing)
(1 DE OI bergon signifie)

**FILING FEE \$35**