F08000000625

| · | | | | | |
|---|-------------------|------|--|--|--|
| (Re | questor's Name) | , | | | |
| | | | | | |
| : (Ad | dress) | | | | |
| (Ad | dress) | | | | |
| | · | | | | |
| (Cit | y/State/Zip/Phone | e #) | | | |
| PICK-UP | ☐ WAIT | MAIL | | | |
| | | | | | |
| (Bu | siness Entity Nar | ne) | | | |
| · (Do | cument Number) | | | | |
| • | outhorit Humbor, | | | | |
| Certified Copies Certificates of Status | | | | | |
| | | | | | |
| Special Instructions to | Filing Officer: | | | | |
| | | | | | |
| • | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Office Use Only



500155340485

05/04/09--01050--004 **35.00

09 MAY - 1 AH 8: 25

Withdrawal 5/11/09 De

COVER LETTER

| SUBJE | CT: Alternative Workforce, Inc. |
|-----------|---|
| SCDGL | (Name of Corporation) |
| DOCU | MENT NUMBER: Unknown |
| The enc | closed withdrawal application and fee are submitted for filing. |
| | return all correspondence concerning this o the following: |
| | Stephanie-Lynn Marotta |
| | (Name of Person) |
| | Alternative Workforce, Inc. |
| | (Firm/Company) |
| | 1300 Combermere |
| | (Address) |
| | Troy, MI 48083 |
| | (City/State and Zip code) |
| For furt | her information concerning this matter, please call: |
| Stephanie | e-Lynn Marotta at (248) 588-1600 Ext. 163 |
| | (Name of Person) (Area Code & Daytime Telephone Number |
| | |

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

| Alternative Workforce, Inc. | | | | |
|--|-------------------------|--------------|-------------|-------------------------|
| (Name of Corporation) | | | | |
| | | | | |
| Unknown | | | | |
| (Document Number of Corporation | (if known) | | | |
| | | | | |
| Ohio | | | | |
| (Incorporated Under Laws | of) | | | |
| This corporation is no longer transacting business or conducting a voluntarily surrenders its authority to transact business or conduct a | | e of Flori | ida an | d hereby |
| This corporation revokes the authority of its registered agent in appoints the Department of State as its agent for service of process time it was authorized to transact business or conduct affairs in Flo | based on a cause of a | | | |
| The following is a current mailing address for the corporation: | | SEUR | M 60 | canadar?* |
| 1300 Combermere (Mailing Address) | | <u> </u> | | ŧĘ |
| (Maning Additss) | | TARY ASSE | 1 | A Manaza, memeren |
| Troy, MI 48083 | | 70 | R | 111 |
| (City/ State /Zip) | | <u> </u> | <u> </u> | il the same |
| | | STATE | 25 | |
| The corporation agrees to notify the Department of State in the future | are of any change in it | ts mailing | g addr | ess. |
| | 04/29/2009 | | | |
| (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) | (Da | te) | | |
| Peter Johnson | Executive Vice Presi | dent | | |
| (Typed or printed name of person signing) | (Title of p | erson signin | g) | |

FILING FEE \$35