## F08000001505

(Re	equestor's Name)		
(Ad	ldress)		
(Ad	ldress)		
(Cil	ty/State/Zip/Phon	e #)	
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## **COVER LETTER**

_	of Corporations	
SUBJECT: P	acific Retirement Ser	
		(Name of Corporation)
DOCUMENT	NUMBER: F08000001	1505
The enclosed w	ithdrawal application and f	fee are submitted for filing.
Please return all	correspondence concerning llowing:	g this
Reva	L. Lohr	
		(Name of Person)
Pacif	ic Retirement Service	es, Inc,
<del></del> ,-		(Firm/Company)
1200	Mira Mar Avenue	
		(Address)
Mode	ord, OR 97504	
Medi	<del></del>	
<u></u>	(C	City/State and Zip code)
	(Communication concerning this matter	
	·	tter, please call:
For further info	·	

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

(Name of Corpora	tion)
	<i>'</i>
F08000001505	
(Document Number of Corporation	ation (if known)
Oregon	aws of)
(Incorporated Under I	aws of)
	<b>~</b>
This corporation is no longer transacting business or conduct voluntarily surrenders its authority to transact business or cond	ing affairs within the State of Florida and hereby
This corporation revokes the authority of its registered ager appoints the Department of State as its agent for service of pro- time it was authorized to transact business or conduct affairs in	cess based on a cause of action arising during the
The following is a current mailing address for the corporation:	
1200 Mira Mar Avenue	
(Mailing Addres	s)
Medford, OR 97504	
(City/ State /Zip	
The corporation agrees to notify the Department of State in the	e future of any change in its mailing address. $3 - 18 - 69$
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
Thomas R. Becker	President/CEO
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35