## F0800000001424

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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: DATAPROSE, INC.	· · · · · · · · · · · · · · · · · · ·
(Name of Corporat	ion)
DOCUMENT NUMBER: F08000001624	
The enclosed withdrawal application and fee are submitted for	r filing.
Please return all correspondence concerning this matter to the following:	,
BRUCE KRUGER	•
(Name of Person)	
DATAPROSE, INC.	
(Firm/Company)	
18020 BURT STREET	
(Address)	
ELKHORN, NE 68022	
(City/State and Zip co	ode)
For further information concerning this matter, please call:	
BRUCE KRUGER 402 at (	431-7672
(Name of Person) (Area C Enclosed is a check for the amount:	Code & Daytime Telephone Number)
\$35 Filing Fee \$43.75 Filing Fee \$\$43.75 Filing Fe Certificate of Status 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

DATAPROSE, INC.		
	(Name of Corporation)	<b>3</b>
		JUL 20
F08000001624		20
	(Document Number of Corporation (if know	vn)
CALIFORNIA		
	(Incorporated Under Laws of)	
		•
	ansacting business or conducting affairs ity to transact business or conduct affairs	
appoints the Department of Stat	athority of its registered agent in Floridate as its agent for service of process bases business or conduct affairs in Floridate	ed on a cause of action arising during
The following is a current mailir	ng address for the corporation:	
18020 BURT STREET		
	(Mailing Address)	
ELKHORN, NE 68022		
	(City/ State /Zip)	
The corporation agrees to notify	the Department of State in the future of	any change in its mailing address.
$\mathcal{A}$ 1		-/-/-
(Signature of a director, presiden receiver or other court appointed	it br other officer - if in the hands of a ed fiduciary, by that fiduciary)	(Date)
	Λο	sistant Secretary
Bruce Kruger (Typed or printed name		(Title of person signing)
(1) ped of printed name	or person agains)	(Title of person signing)