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SECRETARY OF STATE
TALLAHASSEE FI DELE



COVER LETTER

	Division of Corporations				
SUBJE	CT: NEWPOR	T UNIVERSITY INTI	ERNATIONAL		
2020		(Name of Corp	oration)		
DOCU	MENT NUMBER:	F0800000258	35		
The enc	losed withdrawal applic	ation and fee are submitted	l for filing.		
	eturn all correspondence of the following:	concerning this			
		JUAN F. CAS	TRO		
	(Name of Person)				
	(Firm/Company)				
	12723 NW 18 CT				
	(Address)				
	PEMBROKE PINES, FLORIDA 33028				
		(City/State and Zip	code)		
For furt	her information concerning	ng this matter, please call:			
JUAN	CASTRO	at (954	, 540-8907		
	(Name of Person)		ea Code & Daytime Telephone Number)		
	MAILING ADDI Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32	on rations	STREET ADDRESS: 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

NEWPORT UNIVERSITY INTERNATIONAL INC

(Name of Corporation)				
F08000002585				
(Document Number of Corporation (if known)				
CALIFORNIA (Incorporated Under Laws of)				
This corporation is no longer transacting business or conducting aff voluntarily surrenders its authority to transact business or conduct aff				
This corporation revokes the authority of its registered agent in F appoints the Department of State as its agent for service of process be time it was authorized to transact business or conduct affairs in Florida	ased on a cause of action arising during the			
The following is a current mailing address for the corporation:				
4101 WESTERLY PLACE, SUI	TE 103			
(Mailing Address)	APR AHA			
NEPORT BEACH, CA 92660	FILE APR -8 RETARY O			
(City/ State /Zip)	8 PH 12: Y OF STA			
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	04/06/2009 (Date)			
receiver or other court appointed fiduciary, by that fiduciary)	(Date)			
JUAN F CASTRO	PRESIDENT			
(Typed or printed name of person signing)	(Title of person signing)			

FILING FEE \$35