# F08000002975

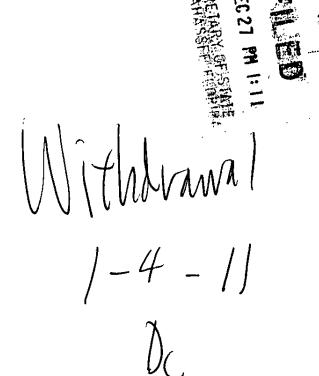
(Requestor's Name)				
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#### **COVER LETTER**

TO: Amendment Section Division of Corporations					
SUBJECT: THE SIGMA GROUP OF AMERICA, INC					
DO BOB	(Name of Corporation)				
DOCUMENT NUMBER: F08000002975  The enclosed withdrawal application and fee are submitted for filing.					
DOUGLASS T. LIND					
(Name of Person)					
		(Firm/Compan	y)		
	17080 HARBOUR PO	` 1	•		
(Address)					
ı	FT MYERS, FL 33908				
•		(City/State and Zip	code)		
For furth	er information concerning this	matter, please call:			
DOUG	LASS T. LIND	at ( 239	<sub>)</sub> 466-5666		
	(Name of Person)		a Code & Daytime Telephone Number)		

#### **MAILING ADDRESS:**

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

### **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

(Name of Corporation)

THE SIGMA GROUP OF AMERICA, INC.

F0800002975			
(Document Number of Corporation (	if known)		
CONNECTICUT (Incorporated Under Laws of	<del>f)</del>		
This corporation is no longer transacting business or conducting at voluntarily surrenders its authority to transact business or conduct a	· · · · · · · · · · · · · · · · · · ·		
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 Flor	based on a cause of action arising during the		
The following is a current mailing address for the corporation:			
C/O LIEBGOLD WUENSCH; 17 ARCADI	AN AVE., #106 =		
(Mailing Address)			
PARAMUS, NJ 07652	27 27 27 27 27 27 27 27 27 27 27 27 27 2		
(City/ State /Zip)			
The corporation agrees to notify the Department of State in the future of any change in its marring address.			
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	y 12/17/10 (Date)		
DOUGLASS T. LIND (Typed or printed name of person signing)	PRESIDENT (Title of person signing)		

**FILING FEE \$35**