## F08000005438

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## COVER LETTER

TO: Amendment Section **Division of Corporations** SUBJECT: JULIO C. OLIVA CONSULTING, INC (Name of Corporation) F08000005438 **DOCUMENT NUMBER:** The enclosed withdrawal application and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JULIO OLIVA (Name of Person) JULIO C. OLIVA CONSULTING, INC (Firm/Company) 3001 NE 185th St Apt 515 (Address) Aventura, FL 33180 (City/State and Zip code) For further information concerning this matter, please call:

MAILING ADDRESS:

(Name of Person)

JULIO OLIVA

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

## **STREET ADDRESS:**

(Area Code & Daytime Telephone Number)

√ 582-0145

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

JULIO C. OLIVA CONSULTING, INC
(Name of Corporation)
2 Page
F08000005438
(Document Number of Corporation (if known)
GEORGIA
(Incorporated Under Laws of)
$\cdot$
This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby
voluntarily surrenders its authority to transact business or conduct affairs in Florida.
This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the
time it was authorized to transact business or conduct affairs in Florida.
•
The following is a current mailing address for the corporation:
0004 NE 4050 OCA 1545
3001 NE 185th St Apt 515
(Mailing Address)
A
Aventura, FL 33180
(City/ State /Zip)
The corporation agrees to notify the Department of State in the future of any change in its mailing address.
R
2-9-2009
(Signature of a thrector, president or other officer - if in the hands of a (Date) receiver or other court appointed fiduciary, by that fiduciary)
Aulia Oliva
(Typed or printed name of person signing)  (Title of person signing)

FILING FEE \$35