(R	equestor's Name)		
(Address)			
(A	ddress)		
(C	ity/State/Zip/Phone	: #)	
PłCK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates	of Status	
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JUN 03 2016

R. WHITE

## **COVER LETTER**

TO: Amendment Section Division of Corporations		
401 1		
SUBJECT: 1CI, Inc.	(Name of Corpor	ation
DOCUMENT NUMBER, F090000	. <u>.</u>	aion)
DOCUMENT NUMBER: FU9UUU		
The enclosed withdrawal application and	fee are submitted f	or filing.
Please return all correspondence concerning matter to the following:	; this	
Crystal Blair		
	(Name of Person	)
Cape Fox Corporation	on	
	(Firm/Company)	)
PO Box 8558		
	(Address)	
Ketchikan, AK 9990	1	
(C	City/State and Zip c	ode)
For further information concerning this matt	ter, please call:	
Crystal Blair	<sub>at (</sub> 907	,225-5163 x428
(Name of Person) Enclosed is a check for the amount:	(Area	Code & Daytime Telephone Number)
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status		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

(Name of Corporation)

1 Ci, Inc.

F0900000469	
(Document Number of Corporation	(if known)
Alaska	
(Incorporated Under Laws of	of)
This corporation is no longer transacting business or conducting a voluntarily surrenders its authority to transact business or conduct	•
This corporation revokes the authority of its registered agent in appoints the Department of State as its agent for service of proce the time it was authorized to transact business or conduct affairs in	ss based on a cause of action arising during
The following is a current mailing address for the corporation:	
PO Box 8558	TO HAY :
(Mailing Address)	Spr. Comments
Ketchikan, AK 99901	PH IZ:
(City/ State /Zip)	<u> </u>
The corporation agrees to notify the Department of State in the fut	ure of any change in its mailing address.
(Signature of a director, president or other officer - if in the hands of a receiver on other court appointed fiduciary, by that fiduciary)	5-20-16 (Date)
Clifford Blair	President
(Typed or printed name of person signing)	(Title of person signing)