F0100004405

(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	usiness Entity Nar	ne)
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Richards Pool Service Inc. (Name of Corporation)		
DOCUMENT NUMBER: <u>F09000004405</u>		
The enclosed withdrawal application and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
John Richards		
(Name of Person)		
Richards Pool Service Inc- (Firm/Company)		
(Firm/Company)		
1420 E. 79 th AUE		
(Address)		
MERRILLVILLE IN 46410 (City/State and Zip code)		
(City/State and Zip code)		
For further information concerning this matter, please call:		
John Richards at (219) 808-9415		
(Name of Person) (Area 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

<u> </u>
(Document Number of Corporation (if known)
INDiana
(Incorporated Under Laws ot)
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:
1420 E. 79 th Ave (Mailing Address)
(Mailing Address)
MERRILLILLE, IN 46410 TO TO THE 22 TO THE PROPERTY OF THE PROP
Rft ser
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 (Date)
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) (Date)
Tohn Richards (Typed or printed name of person signing) (Title of person signing)
FILING FEE \$35