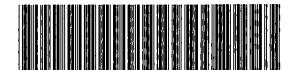
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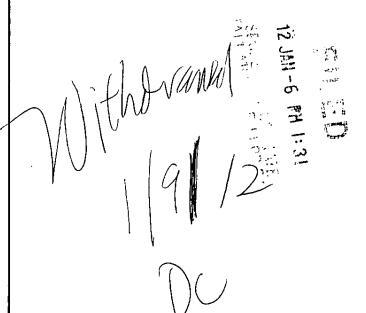
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: CHELSEA DISCOUNT APOTHECARY, IN C. (Name of Corporation)
DOCUMENT NUMBER: F10000000000
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JEFF HONES
(Name of Person)
CHELSEA DISCOUNT APOTHECARY, INC. (Firm/Company)
26450 POLLARD ROAD
(Address)
DAPHNE, AL 36526 (City/State and Zip code)
(City/State and Zip code)
For further information concerning this matter, please call:
TEFE HONEA at (850 ) 341-8410
TEFF HONEA at (850) 341-8410 (Name of Person) (Area Code & Daytime Telephone Number)
MAILING ADDRESS: STREET ADDRESS:

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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## APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

CHELSEA DISCOUNT APONECAN (Name of Corporation)	ey, I	<u>花</u> .	
(Document Number of Corporation (if known)		<del></del>	
(Incorporated Under Laws of)	<del></del>	<del></del>	
This corporation is no longer transacting business or conducting affairs within the State o voluntarily surrenders its authority to transact business or conduct affairs in Florida.	f Florida	and	hereby
This corporation revokes the authority of its registered agent in Florida to accept servic appoints the Department of State as its agent for service of process based on a cause of actitime it was authorized to transact business or conduct affairs in Florida.			
The following is a current mailing address for the corporation:	30.	12 J	
26450 POLLARD ROAD (Mailing Address)		12 JAN -16	Amilian Amilia
DAPHNE AL 36526 (City/State/Zip)			3 5
The corporation agrees to notify the Department of State in the future of any change in its m	ij₩.	2- <del>1110a</del>	i.
(Signature of a director/prosident of other officer if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)  (Date)	<u>-</u>		
Y W. JEFF HONEA PRESIDENT (Typed or printed name of person signing) (Title of person	signing)		

FILING FEE \$35