F1000003031

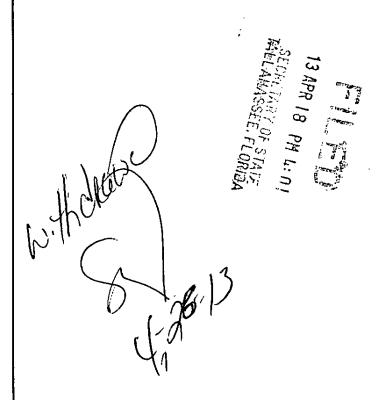
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



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"Your Compliance Solution"

Phone: (636) 639-1880 Fax: (636) 639-1233 <u>www.y2yc.com</u>

Via USPS - Priority Mail

April 15, 2013

Amendment Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

Re: N.C.W.C., Inc. - Withdrawal Application

To Whom It May Concern:

Enclosed please find the Application by Foreign Corporation for Withdrawal of Authority to Transact Business or conduct Affairs in Florida for N.C.W.C., Inc. F10000003031

The following documents make up the application 'packet':

- · Corporations Division Cover Letter;
- this cover letter;
- check # 55226 in the amount of \$43.75;
- Application by Foreign Corporation for Withdrawal of Authority to Transact Business or Conduct Affairs in Florida.

Please forward any approved documents to: Diann Dillon

Year To Year Consulting, LLC 1580 N. Point Prairie Road Foristell, MO 63348

If you have any questions, or if I can provide any additional information, please do not hesitate to contact me.

Thank you for your consideration.

Respectfully submitted,

Diann Dillon

Analyst/Product Compliance Year To Year Consulting, LLC diann.dillon@y2yc.com

WK: (636) 639-1880 FX: (636) 639-1233

Enclosures

COVER LETTER

TO: Amendment Section Division of Corporations		
NOWO		
	(Name of Corpora	ution)
E40000		
DOCUMENT NUMBER: FIUUUUU	703031	
The enclosed withdrawal application and fe	e are submitted for	or filing.
Please return all correspondence concerning to matter to the following:	this	
Diann Dillon		
	(Name of Person)	
Year To Year Cons	ulting, LL	C
	(Firm/Company)	
1580 N Point Prairi	e Road	
	(Address)	
Foristell, MO 63348	}	
(Ci	ty/State and Zip co	ode)
For further information concerning this matter	er, please call:	
Diann Dillon	_{at (} 636	₎ 639-1880
(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	\$43.75 Filing Fe Certified Copy (Additional copy Enclosed)	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

N.C.W.C., Inc.	
(Name of Corporation)	13 APR
F1000003031	S 0
(Document Number of Corporation (if known)	MO P
New Jersey	L. U
(Incorporated Under Laws of)	A

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:

3430 Sunset Avenue (Mailing Address)		
	(City/ State /Zip)	

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 receiver or other court appointed fiduciary, by that fiduciary)

Michael Shaftel

(Typed or printed name of person signing)

President

(Title of person signing)