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

Office Use Only



800216099488

01/06/12--01023--009 **35.00

COVER LETTER

| TO: Amendment Section Division of Corporations | | | |
|---|--|--|--|
| SUBJECT: CorSynergy INC (Name of Corporation) | | | |
| DOCUMENT NUMBER: # 11 000002756 | | | |
| The enclosed withdrawal application and fee are submitted for filing. | | | |
| Please return all correspondence concerning this matter to the following: | | | |
| Thomas A. Vassiliades | | | |
| (Name of Person) | | | |
| Corsyneray Inc | | | |
| (Firm/Company) | | | |
| 109 Shoreline Drive (Address) | | | |
| | | | |
| Gulf Breeze FL 3256/ | | | |
| (City/State and Zip code) | | | |
| For further information concerning this matter, please call: | | | |
| Thomas A. Vassilindes at (850) 932-9767 | | | |
| (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





FLORIDA DEPARTMENT OF STATE Division of Corporations

January 9, 2012

THOMAS A. VASSILIADES CORSYNERGY, INC. 109 SHORELINE DRIVE GULF BREEZE, FL 32561

SUBJECT: CORSYNERGY, INC. Ref. Number: F11000002756

We have received your document for CORSYNERGY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Dissolution to dissolve a Florida domestic corporation have been submitted in error. A withdrawal application must be filed to withdraw the authority of a foreign corporation in Florida.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 912A00000489



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

| (Name of Corporation | , /// |
|---|---|
| (wante of Corporation |) |
| F 1/0000027: | 56 |
| (Document Number of Corporation | n (if known) |
| Delaware | 12 J |
| (Incorporated Under Laws | s of) |
| This corporation is no longer transacting business or conducting voluntarily surrenders its authority to transact business or conduct | affairs within the State of Florida and peby |
| This corporation revokes the authority of its registered agent in appoints the Department of State as its agent for service of procestime it was authorized to transact business or conduct affairs in Fl | n Florida to accept service on its behaltand as based on a cause of action arising during the |
| The following is a current mailing address for the corporation: | |
| ina dinti Ai | |
| 109 Shoreline Drive (Mailing Address) | |
| | |
| Gulf Breeze FL 3256/ | / |
| (City/ State /Zip) | |
| | |
| The corporation agrees to notify the Department of State in the fur | ture of any change in its mailing address. |
| La Alantida | 1-13-2012 |
| (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) | (Date) |
| Thomas A. Vassiliades | CED |
| (Typed or printed name of person signing) | (Title of person signing) |

FILING FEE \$35