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To:

Division of Corporations Fax Number : (850)617-6380

From:

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Phone	:	(850)222-1092	
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: MBS Insight, Inc.

(Name of Corporation)

DOCUMENT NUMBER: FI1000003048

The enclosed withdrawal application and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

	(Name of Person)
MBS Insight, Inc.	
	(Firm/Company)
	(Address)
(Ci	ty/State and Zip code)
For further information concerning this matte	er, please call:
	at ()
(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 Fee & \$52.50 Filing Fee, Certified Copy Certificate of Status & Certified (Additional copy is Copy (Additional copy is enclosed) Enclosed).
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

FL032 - 05/16/2013 Weiters Kilowsz Oskine

12/4/2013 16:05:55 From: To: 8506176380



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

MBS Insight, Inc.

(Name of Corporation)

F!1000003048

(Document Number of Corporation (if known)

Delaware

(Incorporated Under Laws of)

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:

935 First Avenue, c/o General Counsel

(Mailing Address)

King of Prussie, PA 19406

(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 brother officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Brian Yamasaki

(Typed or printed name of person signing)

Assistant Secretary

(Title of person signing)

FILING FEE \$35