F11000004608

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TO:	Amendment Section Division of Corporations
SUBJ	ECT: Triple Canopy, Inc.
	(Name of Corporation)
DOCI	UMENT NUMBER: F11000004608
The er	nclosed withdrawal application and fee are submitted for filing.
	return all correspondence concerning this to the following:
	Jessica Janus
	(Name of Person)
	Triple Canopy, Inc.
	(Firm/Company)
	12018 Sunrise Valley Drive, Suite 140
	(Address)
	Reston, VA 20191
	(City/State and Zip code)
For fu	rther information concerning this matter, please call:
Jess	ica Janus at (703) 673-5011
	(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

Triple (Canopy, Inc.			
	(Name of Corpor	ation)		
F11000	0004608			
	(Document Number of Corpo	ration (if known)		
Illinois				
	(Incorporated Under	Laws of)		
voluntarily surrend This corporation re appoints the Depart	no longer transacting business or conductors its authority to transact business or contevokes the authority of its registered against the following state as its agent for service of protect to transact business or conduct affairs	enduct affairs in Florida. ent in Florida to accept service on it rocess based on a cause of action arisis	ts behal	lf and
The following is a c	current mailing address for the corporation	1:	 i	
12018	Sunrise Valley Drive, Suite 14	10	AL A	12 始8
	(Mailing Addre	ess)		23
Reston	, VA 20191		A	3 m 742
	(City/ State /Zi	p)		\$27 \$27
The corporation ag	rees to notify the Department of State in th	ne future of any change in its mailing	address.	
Scean	a Janus	March 19, 2012		
(Signature of a	director, president or other officer - if in the hands of a ner court appointed fiduciary, by that fiduciary)	(Date)		_
Jessica		Assistant Secretary		
(Typed	or printed name of person signing)	(Title of person signing)		

FILING FEE \$35