## F12000001771

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
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## **COVER LETTER**

TO:	Amendment Section Division of Corporations	
SUBJ	Allotas Financial Comm. Inc.	
5020		(Name of Corporation)
DOC	UMENT NUMBER: F12000001771	
The er	nclosed withdrawal application an	nd fee are submitted for filing.
Please	return all correspondence concerni	ing this matter to the following:
	Gina Robinson	
		(Name of Person)
	Allstar Financial Group, LLC	
		(Firm/Company)
	365 Northridge Rd, Ste 400 (Address)	
		(Address)
	Atlanta, GA 30350	
		(City/State and Zip code)
For fu	rther information concerning this m	natter, please call:
Gina R	obinson	at (678 832-2132
_	(Name of Person)	(Arca Code & Daytime Telephone Number)
Enclos	sed is a check for the amount:	
<b>■</b> \$35	5 Filing Fee	& 🗆 \$43.75 Filing Fee & 🗀 \$52.50 Filing Fee, IS Certified Copy Certificate of Status & Certified (Additional copy is Enclosed)
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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

Allstar Financial Group, Inc.

·	(Name of Corporation)			
F12000001771				
(Do	(Document Number of Corporation (if known)			
Georgia	4/24/2012			
(Incorporated Under Laws	of and date authorized to transact busine	ess/conduct its affairs)		
This corporation is no longer transactivoluntarily surrenders its authority to the				
This corporation revokes the authority appoints the Department of State as its time it was authorized to transact busing	agent for service of process based			
The following is a current mailing add	ress for the corporation:	200		
365 Northridge Rd, Ste 400		2020 JUL 22		
	(Mailing Address)	22		
Atlanta, GA 30350		PH 7:09		
	(City/ State /Zip)	609		
The corporation agrees to notify the De	· ·	iny change in its mailing address.  (Date)		
DAV: D R BA	esigning)	PRESIDENT (Title of person signing)		

FILING FEE \$35