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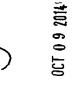




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## **COVER LETTER**

	on of Corporations			
	GRID TOOLS INC	<b>)</b> .		
SUBJECT	(1)	Name of Corporati	on)	
DOCUMEN'	T NUMBER: F120000	05076		
	· · · · · · · · · · · · · · · · · · ·		61:	
The enclosed	withdrawal application and fee	e are submitted for	ning.	
Please return matter to the	all correspondence concerning the	nis		
	HILIP A BAUMGA	RTEN		
<del></del>		(Na		
LAW OFFICE OF PHILIP A BAUMGARTEN				
(Firm/Company)				
2005 PALMER AVENUE - SUITE 191				
		(Address)		
LARCHMONT, NY 10538				
(City/State and Zip code)				
For further information concerning this matter, please call:				
PHILIP	BAUMGARTEN	at (914	656-6705	
	(Na			
ling	Fee \$\int\\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee 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

GRID TOOLS INC	
(Name of Corporation)	
F12000005076	
(Document Number of Corporation (if known)	
DELAWARE	
(Incorporated Under Laws of)	
This corporation is no longer transacting business or conducting affairs with voluntarily surrenders its authority to transact business or conduct affairs in F	
This corporation revokes the authority of its registered agent in Florida to appoints the Department of State as its agent for service of process based of the time it was authorized to transact business or conduct affairs in Florida.	
The following is a current mailing address for the corporation:	
500 MAMARONECK AVENUE - SU	ITE 320
(Mailing Address)	ALL!
HARRISON, NY 10528	P 30 HAS
(City/ State /Zip)	SECRETARY OF STATE ALLAHAS SEE. FLOWING additional change in its mailing additional change in its m
The corporation agrees to notify the Department of State in the future of any	change in its mailing add
	th August 2014 (Date)
DAVID HUW PRICE PRE	ESIDENT

**FILING FEE \$35** 

(Title of person signing)

(Typed or printed name of person signing)