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NAME: PX PROPERTY EXCHANGE, INC.

TYPE OF FILING: WITHDRAWAL

COST:

43.75

RETURN: PLAIN COPY AND CERTIFICATE OF STATUS

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: PX Property Exch	ange, Inc.	
SOBJECT:	(Name of Corporat	ion)
DOCUMENT NUMBER:		<del></del>
The enclosed withdrawal application and f	fee are submitted for	r filing.
Please return all correspondence concerning matter to the following:	this	
Angela Yadegar		
	(Name of Person)	
PX Property Exchan	ge, Inc.	
	(Firm/Company)	
21650 Oxnard Stree	t, Suite 170	0
	(Address)	
Woodland Hills, CA	91367	
	ity/State and Zip co	de)
For further information concerning this matt	er, please call:	
Angela Yadegar	at (866	<sub>)</sub> 539-4173 ext. 1418
(Name of Person) Enclosed is a check for the amount:		ode & Daytime Telephone Number)
\$35 Filing Fee \( \sum \)\$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		STREET ADDRESS: Amendment Section Division of Corporations 2661 Executive Center Circle

Tallahassee, FL. 32301

Tallahassee, FL.32314

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

(Name of Corporation)

PX Property Exchange, Inc.

(Document Number of Co	orporation (if known)
California	
(Incorporated U	ider Laws of)
This corporation is no longer transacting business or convoluntarily surrenders its authority to transact business or	
This corporation revokes the authority of its registered appoints the Department of State as its agent for service the time it was authorized to transact business or conduct	of process based on a cause of action arising during
The following is a current mailing address for the corpora	ition:
21650 Oxnard Street, Sui	te 1700
(Mailing A	idress)
Woodland Hills, CA 9136	Q':, — ţ
(City/ State)  The corporation agrees to notify the Department of State:	E FE
(Signature of a director, president of other officer - if in the hands receiver or other court appointed fiduciary, by that fiduciary)	10/10/2017
Trixy Castro	President
(Typed or printed name of person signing)	(Title of person signing)

**FILING FEE \$35**