## F14000000860

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

Office Use Only



400338543794

01/03/20--01001--012 \*\*35.00

20 JAN -> - 3: 3f

JATACAN TOCHNOLIDER



## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: CAREGIVEVS STORY (Name of Corporation)
DOCUMENT NUMBER: <u>F1400000860</u>
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:  (Name of Person)
CAREGIVERS STORY INC. (Firm/Company)
1730 So. FEDERAL HOY # 212 (Address)
DELRAY BETTEN FL 33483 (City/State and Zip code)
For further information concerning this matter, please call:  CIAROLYN A. BOULT at (45) 451-8124  (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the amount:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & \$\Bigcup \\$43.75 Filing Fee & \$\Bigcup \\$52.50 Filing Fee.  Certificate of Status Certified Copy Certificate of Status & Certified Copy (Additional copy is Enclosed)
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, F1, 323142415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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

CAREGIVEVS STORY (Name of Corporation)
(Document Number of Corporation (if known)
(Incorporated Under Laws of and date authorized to transact business/conduct its affairs)
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:
1730 SO, FEDERAL HUY #212
DEIRAY BEACH F/33483
The corporation agrees to notify the Department of State in the future of any change in its mailing address.
(Signature of a director, posident or other officer - it in the hands of a receiver or other court appointed fiduciary, by that fiduciary)
(Typed or printed name of person signing)  (Title of person signing)  (Title of person signing)
FILING FEE S35