F14000003006

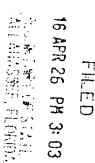
(Requestor's Name)	
(Address)	
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
25	

Office Use Only



000267285010

04/28/16--01029--007 **35.00



Withdrawal

APR 2 7 2016 D CONNELL



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 7, 2016

SYDA FOUNDATION P O BOX 600 SOUTH FALLSBURG, NY 12779

SUBJECT: SYDA FOUNDATION (CORPORATION)

Ref. Number: F14000003006

We have received your document for SYDA FOUNDATION (CORPORATION) and check(s) totaling \$35.00. However, your check(s) and document are being returned for the following:

A foreign corporation authorized to transact business or conduct its affairs in Florida may withdraw its authority by completing the enclosed withdrawal application and submitting the appropriate fee.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell Regulatory Specialist III

Letter Number: 716A00007174

PECEIVED
16 APR 26 AM 7: 53
VISION OF COMPANIONS
ALLAMASSECTIONS

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: 5 YDA FOUNDATIO	oration)
DOCUMENT NUMBÉR: <u>F1A 00000300</u>	_
The enclosed withdrawal application and fee are submitted	d for filing.
Please return all correspondence concerning this matter to the following:	
1 Shwar MALLERET (Name of Person	on)
SYDA FOUNDATIO	
(Firm/Compar	ny)
<u>P. o Box 600</u> (Address)	
SOUTH FALLS BURG, (City/State and Zip	1/4 12779 p code)
For further information concerning this matter, please call:	•
/Shwaw Mallww at (8A) (Name of Person) (Are	a Code & Daytime Telephone Number)
\$35 Filing Fee \$43.75 Filing Fee & \$43.75 Filing Certified Copy (Additional control Enclosed)	y 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

SYDA FOUNDATION (CORPORATION) (Name of Corporation)
F 1A 000003006 (Document Number of Corporation (if known)
(Incorporated Under Laws of)
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 an 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: $P. O. BOX. 600$
P.O BOX 600 (Mailing Address) SOUTH FALLS BYRG, NY 12779 (City/ State /Zip) OR 33
The corporation agrees to notify the Department of State in the future of any change in its mailing address. (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) (Date)
Rambha Brinton Secretary (Typed or printed name of person signing) (Title of person signing)

FILING FEE \$35