F14000004957

(Re	equestor's Name)	
(Ad	ldress)	· ·
(Ac	idress)	
(Ci	ty/State/Zip/Phone	∋ #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		
	<u> </u>	

Office Use Only



900283794949

03/29/16--01018--021 **52.50

SECRETARY OF STATE STORE OF CORPORATIONS

APR 0 4 2016 C MCNAIR

FERGUSON COHEN LLP

Attorneys at Law

John J. Ferguson †

Stuart M. Cohen*

Timothy J. Joyce*

Gerard M. Wrynn !

Sheila T. Murphy † 1

Michael K. Stanton, Jr. †

J. Lincoln Hallowell †

Kenneth J. Aufsesser

Associates

Daniel H. Walsh †

Admitted in CT & NY

Admitted in FL, NY, NJ, DC Bars

Admitted in NY & NJ

25 Field Point Road Greenwich, Connecticut 06830 Telephone: (203) 661-5222

Facsimile: (203) 661-1197

www.fercolaw.com

March 24, 2016

Of Counsel

John E. Meerbergen***

Alan D. Berlin*

Rick M. Capozza †

Bryan J. Farrell*

Nicholas J. Healy*

Jo-Anne Herina Jeffreys ****

Patrick Loftus**

Kenneth Padgett*

Kenneth G. Walsh*

† † Admitted in CT, NY & FL

* Admitted in NY Only Admitted in FL & NY

*** Admitted in CT Only

Department of State Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

> Engineering Quality Assurance and Quality Control Consultants, Inc. Withdrawal of Authority

Dear Sir/Madam,

Enclosed for filing with your office is an Application for Withdrawal of Authority in connection with the above-named corporation, together with a check in the amount of \$52.50.

Please return the Certificate of Status to the address listed on the Cover Letter and Application. An additional copy of the Application is provided herewith.

Thank you for your cooperation.

Very truly yours,

J. Lincoln Hallowell

12Hallowerf

JLH:nm enclosures

6 Map 20 My 11:05

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: ENGINE SLING QUALITY ASSURANCE & SUALITY CONTROL CONSULTANTS, IN
(Name of Corporation)
DOCUMENT NUMBER:F14000004957
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
GLYN EVANS
(Name of Person)
(Firm/Company)
1019 BERKELEY DRIVE
(Address)
KISSIMMEE CI 34744
KISSIMMEE FL 34744 (City/State and Zip code)
For further information concerning this matter, please call:
GLYN EVANS at (407) 483 8229
CLYN EVANS at (407) 483 8229 (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the amount:
\$35 Filing Fee \$43.75 Filing Fee & \$43.75 Filing Fee & \$52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is Enclosed) \$43.75 Filing Fee & \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section STREET ADDRESS: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL.32314

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

ENGINEERING GUALITY ASSURANCE & QUALITY CONTROL CONSULTAINTS, INC. (Name of Corporation)
(Name of Corporation)
F14000004957 5
(Document Number of Corporation (if known) DELAWARE (Incorporated Under Laws of)
DELAWARE (Incorporated Under Laws of)
(incorporated Under Laws 01)
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:
Mailing Address)
(Mailing Address)
KISSIMMEE, FL 34744 (City/ State/Zip)
The corporation agrees to notify the Department of State in the future of any change in its mailing address.
(Signature of director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) (Date)
GNN EVANS (Typed or printed name of person signing) President T (Title of person signing)

FILING FEE \$35