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COVER LETTER

TO: Amendment Section Division of Corporations	
COMMOCEANIE	ORIDA LTD. COMPANY
30D0EC1.	(Name of Corporation)
DOCUMENT NUMBER: F1600000	03598
The enclosed withdrawal application and fe	ee are submitted for filing.
Please return all correspondence concerning t matter to the following:	his
ALI KHAN	
	(Name of Person)
STRACHAN-KHAN F	REGISTERED AGENTS, INC.
AZOO NIMA DOOM DAT	(Firm/Company)
4700 NW BOCA RA	(Address)
BOCA RATON, FL 3	
	ty/State and Zip code)
`	• ,
For further information concerning this matter TALHA KHAN	at (561) 241 - 9991
(Name of Person) Enclosed is a check for the amount:	(Area Code & Daytime Telephone Number)
\$35.Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & \$52.50 Filing Fee, Certified Copy (Additional copy is Enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
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

COMMOCEAN FLORIDA LTD. COMPANY

(Name of Corporation)
F16000003598
(Document Number of Corporation (if known)
BRITISH VIRGIN ISLANDS
(Incorporated Under Laws of)
This corporation is no longer transacting business or conducting affairs within the State of Florida and hereb 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 durin 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 FL617
(Mailing Address)
FLATS,BERMUDA BM
(City/ State /Zip)
The corporation agrees to notify the Department of State in the future of any change in is mailing address.
1 12 7G' 2019
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)
CHRISTINE MCHARG
(Typed or printed name of person signing) (Title of person signing)

FILING FEE \$35