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TO: Amendment Section Division of Corporations				
'	1 Restoration Inc			
SUBJECT: Woodard Cleaning and				
	of Corporation)			
DOCUMENT NUMBER: F1800000538				
The enclosed withdrawal application and fee are su	bmitted for filing.			
Please return all correspondence concerning this matter to the following:				
Christine Jaskot				
(Name	of Person)			
Woodard Cleaning and Restoration, Inc.				
(Firm/C	Company)			
2647 Rock Hill Industrial Ct.				
(Ad	dress)			
St. Louis, MO 63144				
(City/State	and Zip code)			
For further information concerning this matter, please	call:			
Christine Jaskot	314 ₎ 884-6620			
(Name of Person) Enclosed is a check for the amount:	(Area Code & Daytime Telephone Number)			
Certificate of Status Certific	Filing Fee & \$52.50 Filing Fee. cd Copy Certificate of Status & Certified ional copy is Copy (Additional copy is enclosed) sed)			
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

AOH	Woodard Cleaning and Resto		JKIDA
	(Name of Corporation)	16	-
	F18000005387		
	(Document Number of Corporation	(if known)	-
	Missouri		
	(Incorporated Under Laws	of)	•
This corporation	poration is no longer transacting business or conducting a ily surrenders its authority to transact business or conduct	affairs within the State of Florida a affairs in Florida.	nd hereby
appoints	poration revokes the authority of its registered agent in the Department of State as its agent for service of proce it was authorized to transact business or conduct affairs in	ess based on a cause of action arisin i Florida.	ehalf and ng during
The follo	owing is a current mailing address for the corporation;	2019 HAY 28 SECRETALIANAS TALLAHAS	المحصية
	2647 Rock Hill Industrial Ct.	AY 28	F=
	(Mailing Address)		M
	St. Louis, MO 63144	AM 10: 28 SEE, FL	O
	(City/ State /Zip)		
The corp	oration agrees to notify the Department of State in the fut	ure of any change in its mailing add	ress.
(S	Signature of a director, president of other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	5/17/19 (Date)	
(Christine Jaskot	Controller	
	(Typed or printed name of person signing)	(Title of person signing)	