## F23000000362

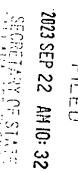
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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Alliance for Childhood Diseases Cor	poration dba Cure 4 The Kids Foundation
SUBJECT:	(Name of Corporation)
DOCUMENT NUMBER: F23000000362	
The enclosed withdrawal application and f	fee are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Christine Tonn	
	(Name of Person)
Cure 4 The Kids Foundation	
	(Firm/Company)
l Breakthrough Way	
	(Address)
Las Vegas, Nevada 89135	
(0	City/State and Zip code)
For further information concerning this mat	ter, please call:
Christine Tonn	at ( ) 691-5703
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the amount:	
\$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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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

Alliance for Childhood Diseases Corporation	
(Name of Corporation	n)
F23000000362	
(Document Number of Corporation	on (if known)
Nevada; April 12, 2007	
(Incorporated Under Laws of and date authorized to tran	sact business/conduct its affairs)
This corporation is no longer transacting business or conducting voluntarily surrenders its authority to transact business or conducting the corporation revokes the authority of its registered agent appoints the Department of State as its agent for service of procedime it was authorized to transact business or conduct affairs in Figure 10170 W Tropicana Avenue # 165-252  (Mailing Address)	ct affairs in Florida.  in Florida to accept service on its behalf an ss based on a cause of action arising during th
Las Vegas, Nevada 89147	
(City/ State /Zip)	
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	uture of any change in its mailing address.  (Date)
Christine Tonn	President
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35