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SECRETARY OF STATE TALLAHASSEE, FLORIDA

withdrawal
TB 7-1-09

COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJI	ECT: OSI Education Services, Inc.
5020	(Name of Corporation)
DOCU	JMENT NUMBER: F92000000597
The en	closed withdrawal application and fee are submitted for filing.
	return all correspondence concerning this to the following:
	Jackie Canavier
	(Name of Person)
	c/o Sessions, Fishman, Nathan & Israel, LLP
	(Firm/Company)
	3850 N. Causeway Blvd., Suite 200
	(Address)
	Metairie, LA 70002
	(City/State and Zip code)
For fu	rther information concerning this matter, please call:
Jackie C	anavier at (504) 846-7906
	(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

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

MAILING ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

(Name of Corporation)

1

OSI Education Services, Inc.

F9200000597
(Document Number of Corporation (if known)
Wisconsin
(Incorporated Under Laws of)
This corporation is no longer transacting business or conducting affairs within the State of Florida and he 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 appoints the Department of State as its agent for service of process based on a cause of action arising during time it was authorized to transact business or conduct affairs in Florida.
The following is a current mailing address for the corporation:
2520 South 170th St.
(Mailing Address)
New Berlin, WI 53151
(City/ State /Zip)
The corporation agrees to notify the Department of State in the future of any change in its mailing address. (Signature of appreciator, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)
Joshua Gindin Secretary
(Typed or printed name of person signing) (Title of person signing)

FILING FEE \$35