F.93000001894

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10/25/05--01016--002 **43.75

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: TWYFORD INTERNATIONAL, INC.		
(Name of Corporation)		
DOCUMENT NUMBER: F93000001894		
The enclosed withdrawal application and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Paul D. Powers		
(Name of Person)		
Hathaway, Perrett et al.		
(Firm/Company)		
5450 Telegraph Road, Suite 200		
(Address)		
Ventura, CA 93003		
(City/State and Zip code)		
For further information concerning this matter, please call:		
Mark McGregor at (805) 644-7111		
(Name of Person) (Area Code & Daytime Telephone Number)		
CERTIFIC ADDRESS		

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 FLORIDA

TWYFORD INTERNATION	NAL, INC. FIG. S
(Name of Corpor	ation)
F9300001894 (Document Number of Corpo	ration (if known)
State of Delaware (Incorporated Under	FLORIDA FLORIDA
This corporation is no longer transacting business or conductivoluntarily surrenders its authority to transact business or conductivoluntarily surrenders its authority to transact business or conductivoluntarily surrenders.	ting affairs within the State of Florida and hereby duct affairs in Florida.
This corporation revokes the authority of its registered age appoints the Department of State as its agent for service of pr time it was authorized to transact business or conduct affairs i	ocess based on a cause of action arising during the
The following is a current mailing address for the corporation	:
15245 Telegraph Road (Mailing Addre	ss)
Santa Paula, CA 93060 (City/ State /Zi	p)
The corporation agrees to notify the Department of State in the (Signature of a director, president or other efficer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	e future of any change in its mailing address. October (Date)
Greg Lloyd (Typed or printed name of person signing)	Director
(1) ped or printed name of person signing)	(Title of person signing)

FILING FEE \$35