

**Scott Fetzer**

F94000000475

March 31, 1999

Florida Department of State  
Amendment Section  
Division of Corporations  
P. O. Box 6237  
Tallahassee, FL 32314

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-04/05/99--01048--006  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

RE: Continental Claims, Inc.  
Application For Withdrawal of Authority

Dear Sir or Madam:

Continental Claims, Inc. ceased doing business July 31, 1998. Enclosed herewith is a completed Application By Foreign Corporation for Withdrawal of Authority to Transact Business or Conduct Affairs in Florida for your handling. Also enclosed is a check in the amount of \$35.00 for the filing fee.

If you have any questions, please do not hesitate to contact me at the number below.

Very truly yours,



Timothy S. Guster  
Title: Secretary

FILED  
99 APR -5 AM 10:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

TSG:kab

Enclosures

*W. J. J. Jr.*  
TLL APR 4 2 1999

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

Continental Claims, Inc.

(Name of Corporation)

Delaware

(Incorporated Under Laws Of)

FILED  
99 APR -5 AM 10:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby 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 and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address to which the Department of State may mail a copy of any process against this corporation that may be served on the Department.

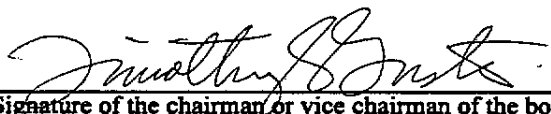
Patricia M. Scanlon, 28800 Clemens Road

(Mailing Address)

Westlake, Ohio 44145

(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

	Secretary
Signature of the chairman or vice chairman of the board, president, or any officer.	Title
Timothy S. Guster	3/31/99
Typed or printed name	Date