SUBJECT: PROTOCOL TELECOMMUNICATION SERVICES, INC. (Name of corporation) **DOCUMENT NUMBER:** The enclosed withdrawal application and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MICHELE DECHIARO (Name of Person) ADECCO, INC. (Firm/Company) 175 BROAD HOLLOW ROAD (Address) MELVILLE, NY 11747 (City/State and Zip code) For further information concerning this matter, please call: MICHELE DECHIARO at 631-844-7316 (Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Amendment Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

MAILING ADDRESS:

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

232314 COMMANDER OF STREET OF STREET

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

PROTOCOL TELECOMMUNICATION SERVICES, INC.

	(Name of Corporation	1)	
DELAWARE			_
	(Incorporated Under Law	's Of)	
This corporation is no longer transaction voluntarily surrenders its authority to	_		f Florida and hereby
This corporation revokes the author appoints the Department of State as time it was authorized to transact but	its agent for service of proce	ess based on a cause of a	
The following is a current mailing address for the corporation:			F II 02 JAN I SECRETAL
175 BROAD HOLLOW ROAD	ATTN: MICHELE DEC	HIARO	SS
MELVILLE, NY 11747	(Mailing Address)		AM IO 37 OF STATE E. FLORID
7 24 2 2 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	(City/State/Zip)		-1/x,
The corporation agrees to notify the	-	SVP OF TAXA	-
Signature of the chairman or vice chair president, or any officer, or if the corp		Title	
receiver, trustee, or other court-appoin			
HARVEY SMALHEISER		114100	
Typed or printed name		Date'	