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To:

Division of Corporations

Fax Number

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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

: (850)222-1092

Phone Pax Number

: (850)878-5368

DISSOLUTION OR WITHDRAWAL SIMONS PETROLEUM, INC.

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COVER LETTER

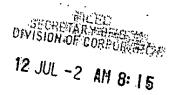
TO:	Amendment Section Division of Corporations		·
SUBJ	ECT: SIMONS PETROLEUM, INC.	(Name o	f Corporation)
DOCU	MENT NUMBER: F95000001545		
The en	closed withdrawal application and fo	e are sub	mitted for filing.
	return all correspondence concerning to to the following:	his	•
	. ((Name o	f Person)
		(Fina/Ca	ompany)
		(Add	ress)
	(City	//State at	nd Zip code)
For fixed	her information concerning this matter	, please	call:
		at (<u> </u>
	(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 FLORIDA

SIMONS PETROLEUM, INC.	
(Name of Corporation)	
P95000001545 (Document Number of Corporation (if known)
Oklahoma (Incorporated Under Laws o	ij
This corporation is no longer transacting business or conducting at voluntarily surrenders its authority to transact business or conduct at	
This corporation revokes the authority of its registered agent in I appoints the Department of State as its agent for service of process time it was authorized to transact business or conduct affairs in Flori	pased on a cause of action arising during the
The following is a current mailing address for the corporation:	
Maxum Petroleum, Inc., Attention: Bel	inda Foxworth
20 Horseneck Lane	
(Mailing Address)	•
Greenwich, CT 05830	
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the future	of any change in its mailing address.
1 hr	6-21-12
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
Belinda Foxworth	Secretary
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35