

Florida Department of State Division of Corporations

Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H070003023273)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number

: (850)878-5926

DISSOLUTION OR WITHDRAWAL

WHML-S GEN-PAR, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

12/19/2007

9269818098

SS:01 Z00Z/61/Z1

https://efile.sunbiz.org/scripts/efilcovr.exe

CT CORPORATION SYSTM

PAGE 01/02

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

WHML-S Gen-Par, Inc.	•
(Name of Corporation)	
F96000003076	,
(Document Number of Corporation (If known)	•
Delaware	
(Incorporated Under Laws of)	
This corporation is no longer transacting business or conducting affairs within t voluntarily surrenders its authority to transact business or conduct affairs in Florid This corporation revokes the authority of its registered agent in Florida to ac appoints the Department of State as its agent for service of process based on a catime it was authorized to transact business or conduct affairs in Florida. The following is a current mailing address for the corporation:	la. cept service on its behalf and
(Mailing Address)	2:25
Dalias, TX 75201 (City/ State /Zip)	. 17
(3.5) (3.6)	
The corporation agrees to notify the Department of State in the future of any chan	ge in its mailing address.
	12/17/07
(Signature of a director, president or other afficer - if in the hands of a receiper or other court appointed fiduciary, by that fiduciary)	(Date)
Anthony Cacioppo Vice Presid	ni
(Typed or printed name of person signing) (T	tle of person nigning)
FILING FEE \$35	·

SS:01 7005/91/21