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950 Breck	questor's Name enridge In. Address		
City/State/	<u>CY 40207- 4087</u> Zip Phone #	Office Use Only	
CORPORATION	NAME(S) & DOCUMENT N	UMBER(S), (if known):	***
1(Corp	oration Name)	10002089011- -02/17/97010340 (Document #) ******35.00 ******	DO1
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3. <u>(Corp</u>	oration Name)	(Document #)	
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□ Walk in □	Pick up time	Certified Copy	
	Will wait Photocopy		
NEW FILINGS	AMENDMENTS	Zi. 3	
Profit	Amendment	STEED IT PILED INLLAHASSEE, FLORIDA	
NonProfit	Resignation of R.A, Officer/D	Director ASSS	
Limited Liability	Change of Registered Agent		
Domestication	Dissolution/Withdrawal	5H / 5 4	က် မ
Other	Метдет	37	
OTHER FILINGS	REGISTRATION/		
Annual Report		(4)	
Fictitious Name	Foreign	-	
Name Reservation	Limited Partnership	_	
	Reinstatement	-	
	Trademark	_	

CR2E031(195)

Examiner's Initials

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

	THE	WENZ-NE	ELY COM	PAUY		
		-	(Name of Corporati	on)		
	KFN	TUCKY				
	1/0/4	TUCKY	orporated Under Le	rws Of)		
This corpora and hereby	ation is no lovoluntarily	nger transacting	g business or con uthority to trans	nducting affairs act business or	within the Si conduct affai	ate of Florida irs in Florida.
behalf and ap	ppoints the I	es the authority Department of Si e time it was au	tate as its agent	for service of	process based	on a cause of
	_	ent mailing adds corporation the		•	•	nail a copy of
	150 BR	ELKENRIZ	\(\left(\) \(\left(\) \(\left(\) \(\left(\) \(\left(\) \) \(\left(\) \(\left(\) \) \(\left(\) \(\left(\) \) \(\left(\) \) \(\left(\) \(\left(\) \) \(\left(\) \) \(\left(\) \) \(\left(\) \(\left(\) \) \(\left(\) \(\left(\) \) \(\left(\) \(\left(\) \) \(\	5T- s)	E 140	<u> </u>
	DUI 5V 11	LĒ, KY	40207 (City/ State /Zip)		
The corpora address.	ation agrees (o notify the De	partment of Stat	e in the future	of any change	in its mailing
	J. J.	Signature Signature GERBER Typed or printed na		CI	-O	
	J.14.	GERBEAL Typed or printed na	me	z	3/47 Date	
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