# F96000006369

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	<b>∍</b> #)
PICK-UP	MAIT	MAIL
(Ві	usiness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



800187481138

**8001874811**38 11/10/10--01030--012 \*\*\$5.00

SECRETARY OF STATE ALLAHASSEF, FINDING

withdrawal

TB

NOV 1 5 2010

#### **COVER LETTER**

TO: Amendment Section Division of Corporations			
SUBJECT: ENGINEERING SERVICES GROUP, INC.			
(Name of Corporation)			
DOCUMENT NUMBER:	000006369		
The enclosed withdrawal application and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
JAMES LEESUN 17H			
(Name of Person)			
ENGINEERING SERVICES GROUP, INC.			
(Firm/Company)			
P.O. BOX 1751			
(Address)			
MOUNT DORA / FLORIDA 32756  (City/State and Zip code)			
For further information concerning this matter, please call:			
Name of Person)	at (407) 383-7111  (Area Code & Daytime Telephone Number)		

### **MAILING ADDRESS:**

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

### **STREET 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

ENGINEBRING SERVICE	35 GROUP, INC.
(Name of Corporation)	
F9600006369	TALE TO
(Document Number of Corporation (if	known)
DELAWARE	RO I
(Incorporated Under Laws of)	Known)  TALLARSSEE FLORID  AND O AN II. 46
This corporation is no longer transacting business or conducting affivoluntarily surrenders its authority to transact business or conduct aff	
This corporation revokes the authority of its registered agent in F appoints the Department of State as its agent for service of process be time it was authorized to transact business or conduct affairs in Floric	ased on a cause of action arising during the
The following is a current mailing address for the corporation:	
P.O. BOX 1751 (Mailing Address)	
(Mailing Address)	
MOUNT DORA, FL 32756	
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the future	of any change in its mailing address.
James lee Fruit	10 21 10 (Date)
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
JAMES LEE SMITH	PRESIDENT
(Typed or printed name of person signing)	(Title of person signing)

**FILING FEE \$35**