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### TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Haw Ids Stores Inc. (Name of corporation)	<u> </u>
and the second of the second o	
DOCUMENT NUMBER:F 980000 592-1	<u>.</u> -
The enclosed withdrawal application and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
- Pamela Cook	·
(Name of Person)	
Harold's Stores Ira (Firm/Company)	4
(Firm/Company)	
P0642970	:
(Address)	
Nama OK 73070 (City/State and Zip code)	·
For further information concerning this matter, please call:	
Pamelal. Cook at (405)329-4045  (Name of Person) (Area Code & Daytime Telephone Number	
(Name of Person) (Area Code & Daytime Telephone Number	er)

#### 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

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

Harold's Stores, Inc.
(Name of Corporation)
F980005954 (Document Number of Corporation (if known)
(Document Number of Corporation (if known)  Oklahoma (Incorporated Under Laws of)
(incorporated Under Laws of)
This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.
This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.
The following is a current mailing address for the corporation:
POBOX 2970 (Mailing Address)
Norman Ok 173070 (City/State/Zip)
The corporation agrees to notify the Department of State in the future of any change in its mailing address.
(Signatule of a director president of other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)
Total Taylor (Typed or printed name of person signing)  (Title of person signing)

FILING FEE \$35