F99000000118

Division of Corporations (Name of corporation) DOCUMENT NUMBER: F9900000118 The enclosed withdrawal application and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Person) 900004587559 *****35.00 *****35.00 (Firm/Company) (City/State and Zip code) For further information concerning this matter, please call: _at (*8*63 (Name of Person) (Area Code & Daytime Telephone Number) **MAILING ADDRESS:** STREET ADDRESS: Amendment Section **Amendment Section**

withdrawal

Division of Corporations

Tallahassee, FL. 32399

409 E. Gaines St.

TO:

Amendment Section

Division of Corporations

Tallahassee, FL. 32314

P.O. Box 6327

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

- REBECCA'S ESTHETIES CONNECTION INC. (Name of Corporation)
(tvame of Corporation)
L) FLALLIAPE
DELAWARE (Incorporated Under Laws Of)
The state of the s
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:
5150 S. FLORIDA AVE (Mailing Address)
(Mailing Address)
LAKELAND FL. 33813 (City/State/Zip)
(City/ State /Zip)
The corporation agrees to notify the Department of State in the future of any change in its mailing address.
Signature of the chairman or vice chairman of the board, president, or any officer, or if the corporation is in the hands of a receiver, trustee, or other court-appointed fiduciary, by that fiduciary.
receiver, trustee, or other court-appointed fiduciary, by that fiduciary
Robert F Odin 9-7-01
Typed or printed name Date
ar well