

F990000001069

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

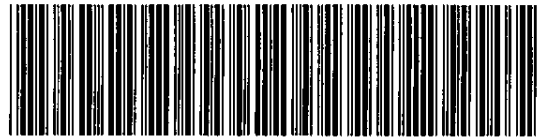
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100138103111

11/25/08--01031--002 \*\*25.00

01/05/09--01072--001 \*\*10.00

FILED

09 JAN -5 PM 1:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Amendments*

*W. J. Hor*  
*1/8/09*

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ABSOLUTE SOLUTIONS TECHNOLOGY INC  
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

WILLIAM J SIFER, CPA  
(Name of Person)

DEGROUCHY, SIFER AND COMPANY  
(Firm/Company)

892 SECOND STREET PIKE  
(Address)

RICHBORO PA 18954  
(City/State and Zip Code)

For further information concerning this matter, please call:

WILLIAM J SIFER, CPA at ( 215 ) 322-4055  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☒ \$25 Filing Fee      ☐ \$30 Filing Fee & Certificate of Status      ☐ \$55 Filing Fee & Certified Copy      ☐ \$60 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 2, 2008

WILLIAM J. SIFER, CPA  
DEGROUCHY, SIFER AND COMPANY  
892 SECOND STREET PIKE  
RICHBORO, PA 18954

SUBJECT: ABSOLUTE SOLUTIONS TECHNOLOGY, INC.  
Ref. Number: F99000001069

We have received your document for ABSOLUTE SOLUTIONS TECHNOLOGY, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

It appears that you completed the wrong form.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts  
Regulatory Specialist II

Letter Number: 408A00058943

RECEIVED  
2008 DEC 30 AM 8:00  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**DEGROUCHY, SIFER & COMPANY**  
CERTIFIED PUBLIC ACCOUNTANTS  
MANAGEMENT CONSULTANTS

892 SECOND STREET PIKE  
RICHBORO, PENNSYLVANIA 18954-1005

TELEPHONE: (215) 322-4055  
FAX: (215) 322-0205  
EMAIL: CPA@DSCPA.COM

December 9, 2008

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

Re: Absolute Solutions Technology, Inc.

Dear Tina:

Enclosed please find the completed application by foreign corporation for withdrawal of authority in Florida.

I have enclosed a copy of your notice informing me that you received the \$25. payment with the wrong form originally submitted. Also enclosed is a check for \$10. to cover the balance of the \$35. filing fee for this form.

Please do not hesitate to contact me should you require any further information.

Very truly yours,



Julie Heineman Fuoco, CPA  
deGrouchy, Sifer & Company

JHF/das  
Enclosure

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ABSOLUTE SOLUTIONS TECHNOLOGY INC  
(Name of Corporation)

**DOCUMENT NUMBER:** F99000001069

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this  
matter to the following:

WILLIAM J SIFER, CPA

(Name of Person)

DEGROUCHY, SIFER AND COMPANY

(Firm/Company)

892 SECOND STREET PIKE

(Address)

RICHBORO PA 18954

(City/State and ZIP code)

For further information concerning this matter, please call:

WILLIAM J SIFER, CPA

(Name of Person)

at

(215) 322-4055

(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**

ABSOLUTE SOLUTIONS TECHNOLOGY INC

(Name of Corporation)

F99000001069

(Document Number of Corporation (if known))

PENNSYLVANIA

(Incorporated Under Laws of)

FILED  
09 JAN -5 PM 1:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

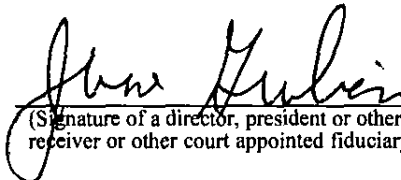
59 STEAMWHISTLE DRIVE

(Mailing Address)

IVYLAND PA 18974

(City/ State /ZIP)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

  
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

JEROME GIULIANO

(Typed or printed name of person signing)

  
(Date)

PRESIDENT

(Title of person signing)

**FILING FEE \$35**