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**IT Corporation**

2790 Mosside Boulevard  
Monroeville, PA 15146-2792  
Tel. 412.372.7701  
Fax. 412.373.7135

A Member of The IT Group

F99000001626

September 16, 2000

Amendment Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 23214

100003471821--2  
-11/21/00--01021--001  
\*\*\*\*\*96.25 \*\*\*\*\*35.00

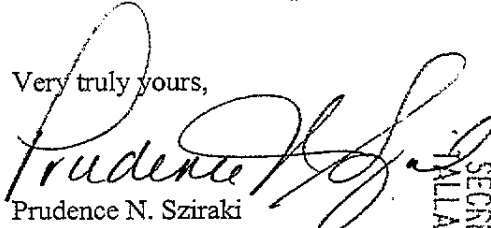
**Re: Application for Withdrawal**

Dear Sir or Madam:

Enclosed please find for filing an Application for Withdrawal pertaining to **ICF Kaiser Defense Programs, Inc.** Also enclosed is our check in the amount of \$96.25 representing your filing fee.

Should you have any questions or need additional information, please do not hesitate to contact me at the above number.

Very truly yours,

  
Prudence N. Sziraki  
Corporate Paralegal

Pns  
Enclosure

FILED  
00 NOV 20 AM 8:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Withdr*  
7. LEWIS NOV 29 2000

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

ICF KAISER DEFENSE PROGRAMS, INC.  
(Name of Corporation)

DELAWARE  
(Incorporated Under Laws Of)

FILED  
00 NOV 20 AM 8:15  
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.

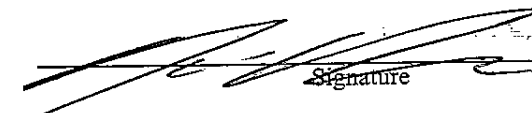
This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address to which the Department of State may mail a copy of any process against this corporation that may be served on the Department.

2790 MOSSIDE BOULEVARD  
(Mailing Address)

MONROEVILLE, PA 15146  
(City/ State /Zip)

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

  
Signature  
AUTHORIZED AGENT  
Title  
JAMES M. REDWINE  
Typed or printed name  
NOVEMBER 7, 2000  
Date