F99000002181

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: SIRI INCORPORATED
(Name of Corporation)
DOCUMENT NUMBER: F99000002181
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
CORNELIA ZAHN
CORNELIA ZAHN (Name of Person)
C/O ALEXANDRIA R. YANNOTTI, CPA (Firm/Company)
(Firm/Company)
P.O. Box 305775 (Address)
(Address)
ST. THOMAS, VI 00803 (City/State and Zip code)
For further information concerning this matter, please call:
CORNELIA ZAHN at (340) 344-8/38 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
CTDEET ADDDECC.

STREET ADDRESS:

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

MAILING 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

SIRL INCORPORATED
SIRI LINCORPORATED SIRI LINCORPORATED SIRI LINCORPORATED SIRI LINCORPORATED AND SIRI LINCORPORATED
F 9 9 0 0 0 0 0 2 1 8 1 (Document Number of Corporation (if known)
(Document Number of Corporation (if known)
FLORTA
FLORIDA (Incorporated Under Laws of)
· · · · · · · · · · · · · · · · · · ·
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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:
GO ALEXANDRIA YANNOTTI CPA P.O. BOX 305775 (Mailing Address)
ST. THOMAS, VI 00803-5775 (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)
CORNELIA ZAHN PRESIDENT (Typed or printed name of person signing) (Title of person signing)

FILING FEE \$35