

F99000003003

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

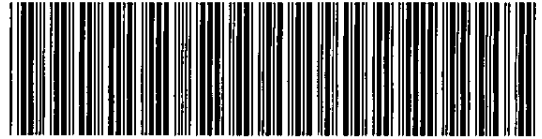
(Business Entity Name)

(Document Number)

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08 OCT 27 PM 12:59

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

Withdrawal/cus
@ 10/31/08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CHAPMAN FREEBORN AMERICA, INC.
(Name of Corporation)

DOCUMENT NUMBER: F99000003003

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

Please return all correspondence concerning this
matter to the following:

JOSE M. VALENCIA

(Name of Person)

CHAPMAN FREEBORN AMERICA, INC.

(Firm/Company)

5340 NW 20TH TERRACE, SUITE 207

(Address)

FORT LAUDERDALE, FLORIDA 33309

(City/State and Zip code)

For further information concerning this matter, please call:

JOSE M. VALENCIA

(Name of Person)

at (954) 993-7471

(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**

CHAPMAN FREEBORN AMERICA INC

(Name of Corporation)

F99000003003

(Document Number of Corporation (if known))

STATE OF GEORGIA

(Incorporated Under Laws of)

FILED STATE
SECRETARY OF CORPORATIONS
OCT 21 AM 12:59

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:

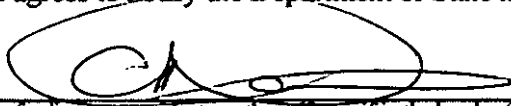
5340 NW 20TH TERRACE, SUITE 207

(Mailing Address)

FORT LAUDERDALE, FLORIDA 33309

(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)

OCT 23, 2008

(Date)

CAROL NORMAN

(Typed or printed name of person signing)

(Title of person signing)

FILING FEE \$35