

F99000004117

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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07 JUL 12 AM 10:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Withdn

C. Coulllette JUL 12 2007

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: withdrawal - Jesus Supernatural Healing Temple, Inc
(Name of Corporation)

DOCUMENT NUMBER: F99000004117

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

Please return all correspondence concerning this
matter to the following:

Bobby Graham
(Name of Person)

PO Box 16
(Firm/Company)

Ma
(Address)

Malone FL 32445
(City/State and Zip code)

For further information concerning this matter, please call:

_____ at (_____) _____
(Name of Person) (Area Code & Daytime Telephone Number)

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**

Jesus Supernatural Healing Temple Inc
(Name of Corporation)

F99000004117
(Document Number of Corporation (if known))

(Incorporated Under Laws of)

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:

P.O. Box 16
(Mailing Address)

Malone FL. 32445
(City/ State /Zip)

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TALLAHASSEE, FLORIDA

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

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

7-12-07
(Date)

Bishop Bobby Graham
(Typed or printed name of person signing)

Presiding Bishop
(Title of person signing)

FILING FEE \$35