F990000 4828

(Re	equestor's Name)	
(Ac	idress)	
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(Ci	ty/State/Zip/Phone	e #)
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: ALFUNALE GRAVE (Name of corpor	Co, Ivc
(name of corpor	ation)
DOCUMENT NUMBER: #F99000	004828
The enclosed withdrawal application and fee are sul	omitted for filing.
Please return all correspondence concerning this matter to the following:	
UE YANDE	es Wesser
(Name o	f Person)
AU ENION E	Price Co Timo
(Firm/C	ompany)
18306 WABE	18 Aug
(Add	iress)
AUENDALI (City/State a	and Zip code)
For further information concerning this matter, please	e call:
luc le le ser	618)263-352/
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET ADDRESS:	MAILING ADDRESS:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations

Amendment Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL. 32399

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

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

ALLENDALE GRAVE CO. TAX (Name of Corporation)
#F 9900000 4828 (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:
18306 WABASH 18 AUE (Mailing Address)
ALLENDALE, J. 62410 AHASSESSI AND THE STATE OF THE STATE
The corporation agrees to notify the Department of State in the future of any change in its marting address. (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)
Typed or printed name of person signing) (Vitte of person signing)

FILING FEE \$35