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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT:	ignition, Inc. (Name of Corporation)
···	(Name of Corporation)
DOCUMENT NUMBER:	
The enclosed withdrawal application Please return all correspondence co	on and fee are submitted for filing, neerning this matter to the following:
	Susan Driscoll
	(Name of Person)
	·
	(Firm/Company)
	197 McWhorter DR
	(Address)
<u> </u>	197 McWhorter DR (Address) Fitzgerald GA 31750 (City/State-and Zip code)
For further information concerning t	
Susan Driva	at (104) 432 1955 (Area Code & Daytime Telephone Number)
(Name of Person) Enclosed is a check for the amount:	(Area Code & Daytime Telephone Number)
\$35 Filing Fee \$\Bar{\Bar{\Bar{\Bar{\Bar{\Bar{\Bar{	Fee & Status Certified Copy Certificate of Status & Certified (Additional copy is Enclosed)
MAILING ADDRES	SS: STREET ADDRESS:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL.32314 Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL. 32301

* APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA
isnitim Inc. (Name of Corporation)
F9900005882 (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:
197 Mewhate De (Mailing Address)
(Willing Address) 1 Fite School of 31750 (Cityl 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) (Date)
(Typed or printed name of person signing) (Title of person signing) (Title of person signing)

FILING FEE \$35

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