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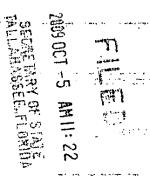
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EXAMINER

MO7-1300

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Pinnacle Technology Group Worldwide L (Name of Foreign Limited Liability Company)	L
Dear Sir or Madam:	
The enclosed withdrawal and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Michael Fuari (Name of Person)	
	ug ng
(Firm/Company)	ا المعتبر الاجماعين الإنجاميين
23 Russett Rd (Address)	
Sandy Hook, CT 06482 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Lee Ann Haubert at (203) 364-0817 (Name of Person) (Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:	
\$25 Filing Fee \$\ \times \text{\$30 Filing Fee & } \text{\$\text{\$\subset\$}}\$\$ \$55 Filing Fee & \$\text{\$\text{\$\subset\$}}\$\$ \$60 Filing Fee, \$\text{\$\text{\$\center{certificate of Status}}\$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

Pranacle Technology Group Worldwide LC
(cross reference name - Pinnacle Technology Grouphic
Comme - Pinnacle rechlorogy or out picket
<u>Vela ware</u>
(Jurisdiction of its organization)
This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.
This limited liability company revokes the authority of its registered agent 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 in Florida.
23 Russett Road Es 8
Sandy Hook, CT 06482
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
the more
(Signature of member or authorized representative of a member)
(Typed or printed name of signee)

Filing Fee: \$25.00