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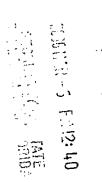
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## **COVER LETTER**

·	TO: Registration Section Division of Corporations		
	SUBJECT: HMO deus North America (Name of Foreign Limited Liability Company)	LLC	
	Dear Sir or Madam:		
	The enclosed withdrawal and fee(s) are submitted for filing.		
	Please return all correspondence concerning this matter to the following:		
	Diana Haker (Name of Person)		
	Amadeus Americas, Inc. (Firm/Company)		
	9250 NW 36 St. (Address)		,- <b>,-</b>
	MIAMI FZ 33 178 (City/State and Zip Code)		est spront 3 3
	For further information concerning this matter, please call:	Pale 10	".e.
	Dlana Houser at 305, 499 6056 (Name of Person) (Area Code & Daytime Telephone Number)	1/-	
	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 \$30 Filing Fee &		

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

Amadeus North America LLC (Name of limited liability company)
Delaware
(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.
9250 NW BL H. (Mailing address)
MIAMI FL 33178 (City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
& Calallan
(Signature of member or authorized representative of a member)  [2]  [2]  [3]  [4]  [5]  [6]  [7]  [7]  [7]  [7]  [8]  [8]  [9]  [9]  [9]  [9]  [9]  [9
(Typed or printed name of signee)

Filing Fee: \$25.00