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COVER LETTER

TO: A	mendment Section	
D	Division of Corporations	
SUBJEC	CT:	GIBSON GREETINGS, INC.
		(Name of Corporation)
DOCUM	IENT NUMBER:	PO7562
The encl	osed withdrawal application	on and fee are submitted for filing.
	turn all correspondence con the following:	cerning this
	CHRISTOPHER	W. HAFFKE, ESQ.
		(Name of Person)
	AMERICAN GR	EETINGS
•		(Firm/Company)
	ONE AMERICA	n road
·		(Address)
	CLEVELAND,	OH 44144
	<u>, 1.</u>	(City/State and Zip code)
For furth	er information concerning the	his matter, please call:
CHRIST	TINE ROSENOW	at (216) 252-7300 x-1223
	(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

GIBSON GREETINGS, INC.
GIBSON GREETINGS, INC. (Name of Corporation)
PO 7562
\cdot
(Document Number of Corporation (if known)
DELAWARE
. (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:
. ONE AMERICAN ROAD
(Mailing Address)
₹
CLEVELAND, OH 44144
(City/ State /Zip)
m em
The corporation agrees to notify the Department of State in the future of any change in its matting address.
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)
CHRISTOPHER W. HAFFKE ASSISTANT SECRETARY (Typed or printed name of person signing) (Title of person signing)

FILING FEE \$35