

PI9559

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

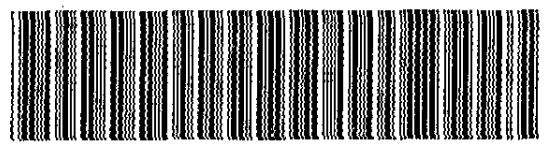
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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NATIONAL MANAGEMENT CORPORATION
(Name of corporation)

DOCUMENT NUMBER: P19559

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARY VANDENBERG, STAFF ACCOUNTANT
(Name of Person)

NATIONAL MANAGEMENT CORPORATION
(Firm/Company)

PO BOX 13006
(Address)

MERRILLVILLE, IN 46411-3006
(City/State and Zip code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

MARY VANDENBERG, STAFF ACCOUNTANT at (219) 736-1100, EXTENSION 128
(Name of Person) (Area Code & Daytime Telephone Number)

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

MAILING ADDRESS:
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

NATIONAL MANAGEMENT CORPORATION
(Name of Corporation)

INDIANA
(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.

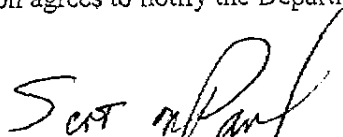
This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address for the corporation:

PO BOX 13006
(Mailing Address)

MERRILLVILLE, IN 46411-3006
(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.



Signature of the ~~XX~~
president, ~~XX~~
~~XX~~

PRESIDENT

Title

SCOTT M. POWELL

Typed or printed name

11/11/03

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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