# P21192

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# **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: Etienne Aigner, Inc.		
(Name of Corporation)		
DOCUMENT NUMBER: P21192		
The enclosed withdrawal application and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Attn: Dawn Maresco		
(Name of Person)		
Etienne Aigner, Inc.		
(Firm/Company)		
19 West 34th Street, Suite 302		
(Address)		
New York, NY 10001		
(City/State and Zip code)		
For further information concerning this matter, please call:		
Dawn Maresco at ( 212 ) 868-2770		
(Name of Person) (Area Code & Daytime Telephone Number)		
CTDEET ADDRESS. MAILING ADDRESS.		

### 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

(Name of Corporation)

Etienne Aigner, Inc.

P21192	OG AP
(Document Number of Corporation (if I	known)
Delaware	Fig. R
(Incorporated Under Laws of)	PATE ORIDA
This corporation is no longer transacting business or conducting affair voluntarily surrenders its authority to transact business or conduct affair	——————————————————————————————————————
This corporation revokes the authority of its registered agent in Floappoints the Department of State as its agent for service of process baselime it was authorized to transact business or conduct affairs in Florida	sed on a cause of action arising during the
The following is a current mailing address for the corporation:	
19 West 34th Street, Suite 302	
(Mailing Address)  New York, NY 10001  (City/ State /Zip)	
` · · · ·	of any shapes in its mailing address
The corporation agrees to notify the Department of State in the future of Latence State in the future of Latence State in the future of Latence State in the future of the corporation of a director, president of other officer - if in the hands of a	3-13-06 (Date)
receiver or other court appointed fiduciary, by that fiduciary)  VICTORIA !! DAWN'! MACES CO	CF O
(Typed or printed name of person signing)	(Title of person signing)

**FILING FEE \$35**