P25209

(Re	equestor's Name)		
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TRANSMITTAL LETTER

	Amendment Section Division of Corporations				
SUBJE	ECT: GALLEON ARTIFACTS	CORPORATION			
	(Name of corp	poration)			
DOCU	UMENT NUMBER: P25209	·····			
The end	closed withdrawal application and fee are s	submitted for filing.			
	return all correspondence concerning this to the following:				
Frederick C. Diamond, Esq.					
(Name of Person)					
Law Offices of Frederick C. Diamond					
	(Firm/Company)				
23 V.F.W. Parkway					
(Address)					
Revere, MA 02151					
	(City/State	e and Zip code)			
For fur	ther information concerning this matter, plea	se call:			
Fre	ederick C. Diamond at	(781) 289-9137 Fax 781-284-0948			
	(Name of Person)	(Area Code & Daytime Telephone Number) 781 244-5849 Cell			
	STREET ADDRESS:	MAILING ADDRESS:			
	Amendment Section	Amendment Section			
	Division of Corporations	Division of Corporations			
	409 E. Gaines St.	P.O. Box 6327			
	Tallahassee, FL. 32399	Tallahassee, FL. 32314			

Please note: Once application is processed a prepaid Fed Exis enclosed. Thank you for your cooperation.

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

GALLEON ARTIFACTS CORPORATION
(Name of Corporation)
P 25209
(Document Number of Corporation (if known)
Delaware File Number 2189807 (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:
203 Squire Road, P.O. Box 257 (Mailing Address)
203 Squire Road, P.O. Box 257 (Mailing Address) Revere, MA 021511 (City/ State/Zip)
Revere, MA 0215# (City/ State /Zip)
City state (Zip) FLORIEL STATE STA
The corporation agrees to notify the Department of State in the future of any change in its mailing address.
(Signature of a director, president or other office) -if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) Amount 18, 2005 (Date)
Dennis J. Sentner (Typed or printed name of person signing) (Tiple of person signing) Ltd., & Galleon Artifacts
FILING FEE \$35 Corporation