

Document Number Only

P28896

FILED
Nov 05, 1997 08:00 AM
Secretary of State

C T Corporation System

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301

City

State

Zip

Phone

CORPORATION(S) NAME

600002338886--5
-11/05/97--01054--027
*****35.00 *****35.00

600002338886--5
-11/05/97--01054--028
*****52.50 *****52.50

Withdrawal
Atico International Incorporated

- | | | |
|--|--|---|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> NonProfit | | |
| <input type="checkbox"/> Limited Liability Company | <input checked="" type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Foreign | | |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Reservation | <input type="checkbox"/> Change of B.A. |
| <input type="checkbox"/> Limited Liability Partnership | | <input type="checkbox"/> Fictitious Name |
| <input checked="" type="checkbox"/> Certified Copy | <input type="checkbox"/> Photo Copies | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call if Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

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97 NOV -5 AM 11:14

SECRETARY OF
TALLAHASSEE, FLORIDA

Name	
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Acknowledgment	Don
W.P. Verifier	Don

11/5

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RECEIVED
97 NOV -5 PM 12:31
DIVISION OF CORPORATION

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

ATICO INTERNATIONAL INCORPORATED

(Name of Corporation)

Delaware

(Incorporated Under Laws Of)

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97 NOV -5 AM 11:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 to which the Department of State may mail a copy of any process against this corporation that may be served on the Department.

501 S. Andrews Avenue

(Mailing Address)

Fort Lauderdale, Florida 33302

(City - State - Zip)

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


Signature

October 31, 1997
Date

Steve Felkowitz

Typed or printed name

Vice President

Title