P3 146 Requestor's Name

Address

City/State/Zip Phone #

Will wait

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Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

| 1 | | |
|-----------|--|----------------|
| | (Corporation Name) | (Document #) |
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| | (Corporation Name) | (Document #) |
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| | (Corporation Name) | (Document #) |
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| | (Corporation Name) | (Document #) |
| | <u></u> | |
| → Walk in | Pick up time | Certified Copy |

Photocopy

| NEW FILINGS |
|-----------------------|
| Profit |
| NonProfit |
| Limited Liability |
| Domestication |
| Other |

Mail out

| | AMENDMENTS | |
|---|--|--|
| | Amendment | |
| | Resignation of R.A., Officer/ Director | |
| | Change of Registered Agent | |
| V | Dissolution/Withdrawal | |
| | Merger | |

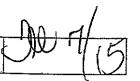
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| | OF STATE SEE, FLORIDA | 全豆 | |

| THE PARTY THE PARTY THE PARTY AND THE | OTHER FILINGS |
|---|------------------|
| | Annual Report |
| | Fictitious Name |
| | Name Reservation |

| REGISTRATION/-QUALIFICATION: |
|------------------------------|
| Foreign |
| Limited Partnership |
| Reinstatement |
| Trademark |
| Other |

Examiner's Initials

Certificate of Status



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

| Midland Property Management, Inc. 20 (Name of Corporation) Missouri (Incorporated Under Laws Of) |
|--|
| (Name of Corporation) |
| Missouri Alia & |
| (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 to which the Department of State may mail a copy of any process against this corporation that may be served on the Department. |
| (Mailing Address) |
| Shawner Mission Ks 66205 (City/State/Zip) |
| The corporation agrees to notify the Department of State in the future of any change in its mailing address. Signature Fittle Title T |
| Thomas T Kinmen 6/30/98 Typed or printed name Date |