P35866

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T-0	A 1						
TO:	Amendment Section Division of Corporations						
	Division of Corporations	•					
SUBJ	DECT:TOM MICHAELS & ASSOCI	ATES, INC.					
		of Corporation)					
DOC	UMENT NUMBER: P35866						
The en	nclosed withdrawal application and fee are $\sin^{\frac{2\pi}{3}}$	bmitted for filing.					
	e return all correspondence concerning this r to the following:						
	Tom Michaels						
	(Name	of Person)					
	Tom Michaels & Associates,	Inc.					
	(Firm/C	Company)					
	2231 Victory Lane, Suite 100						
	(Ad	dress)					
	Birmingham, AL 35216						
	(City/State)	and Zip code)					
	•						
For fu	urther information concerning this matter, please	e call:					
	Tom Michaels at C	205) 985-4584					
-	(Name of Person)	(Area Code & Daytime Telephone Number)					
	<u>.</u>	•					
	STREET ADDRESS:	MAILING ADDRESS:					
	Amendment Section	Amendment Section					
	Division of Corporations	Division of Corporations					
	P.O. Box 6327	Clifton Building					
	Tallahassee, FL 32314	2661 Executive Center Circle					
	***	Tallahassee, FL 32301					
	Ĭ						

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

	TOM MICHAELS &	ASSOCIATES, IN	NC.	
		(Name of Cor	poration)	
	P35866	±		TAUS OF W
		(Document Number of Co	rporation (if known)	CAT
_	Alabama	_#_		55.52 En 0
		(Incorporated Un	der Laws of)	, r
This corpo	oration is no longer trans- v surrenders its authority	acting business or cond to transact business or d	ducting affairs within the conduct affairs in Florida	e State of Florida and hereby
appoints th	oration revokes the authoric Department of State as authorized to transact but	its agent for service of	process based on a caus	ept service on its behalf and se of action arising during the
The follow	ving is a current mailing a	address for the corporat	ion:	
_	2231 Victory La	ne, Suite 100 (Mailing Ad	dress)	
_	Birmingham, AL	35216 (City/ State	/Zip)	
(Sie	nature of a director, president or ceiver or other court appointed fid	Mala Co	4/24/06	e in its mailing address. (Date)
	Thomas D. Micha (Typed or printed name of pe		Preside (Tit	ent le of person signing)

FILING FEE \$35