F1200000192

(Requestor's Name)				
(Address)				
(Address)				
,				
(City/State/Zip/Phone #)				
(Otty/Otate/Zip/) Hone #/				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
,				
Certified Copies Certificates of Status				
Certified Copies				
Special Instructions to Filing Officer:				





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FILED 14 JAN-7 PH 2:14



ION SERVICE COMPANY.
ACCOUNT NO. : 12000000195
REFERENCE : 951760 7864907
AUTHORIZATION :
COST LIMIT : \$ 35.00
ORDER DATE : January 7, 2014
ORDER TIME : 2:48 PM
ORDER NO. : 951760-015
CUSTOMER NO: 7864907
FOREIGN FILINGS
NAME: YOUTH SPECIALTIES, INC.
XX CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY
XXXX WITHDRAWAL/CANCELLATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF STATUS
CONTACT PERSON: Susie Knight - EXT# 52956
EXAMINED.

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

YOUTH SPECIALTIES, INC.

	(Name	of Corporation)		
	F12	000000192		
	(Document Number	r of Corporation (if kno	own)	
	им	INESOTA		
	(Incorporat	ed Under Laws of)		
This corporation is no lon- voluntarily surrenders its a			within the State of Florida s in Florida.	and hereby
	of State as its agent for ser	rvice of process bas	da to accept service on its sed on a cause of action ari da.	
The following is a current	nailing address for the co	rporation:		
	3530 E	28TH STREET		
	(Maili	ng Address)		
	MINNEAP	OLIS, MN 55406		新 手 I
	(City/	State /Zip)		
	_ /\		any change in its mailing a $12/26/13$	ddress.
(Signature of a director, pr receiver or other court ap	esident of other officer - if in the hippointed fiduciary, by that fiduciary	ands of a y)	(Date)	
ноч	N POTTS		VICE PRESIDENT	
(Typed or printed	name of person signing)		(Title of person signing)	
	FILIN	G FEE \$35		