F94000005121

The Brighter Side, Inc.
Requester's Name

4900 N. Lilly Rd.
Address

Menomonee Falls, Wi 53053
City/State/Zip   Phone #

Office Use Only

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

1. _____
   (Corporation Name)   (Document #)

2. _____
   (Corporation Name)   (Document #)

3. _____
   (Corporation Name)   (Document #)

4. _____
   (Corporation Name)   (Document #)

☐ Walk in   ☐ Pick up time _____   ☐ Certified Copy

☐ Mail out   ☐ Will wait   ☐ Photocopy   ☐ Certificate of Status

NEW FILINGS

☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

With 5-11-01 MB

AMENDMENTS

300004133523--0
-05/03/01--01062--004
*****52.50   *****52.50

☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

CR2E031(7/97)

Examiner's Initials

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

The Brighter Side, Inc.
_____
(Name of Corporation)

Wisconsin
_____
(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.
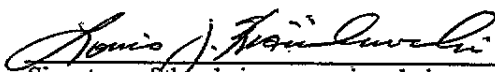
4900 N. Lilly Road
_____
(Mailing Address)

Menomonee Falls WI   53051
_____
(City/ State /Zip)

FILED
01 MAY -2 AM 9: 25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

_____   CFO, Secretary & Treasurer
Signature of the chairman or vice chairman of the board,   Title
president, or any officer.

Louis J. Kisielewski   4/27/01
_____   _____
Typed or printed name   Date