

# F000000003670

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5368

**DISSOLUTION OR WITHDRAWAL  
WIRE ROPE INDUSTRIES, INC.**

Certificate of Status	0
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TALLAHASSEE, FLORIDA

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Corporate Filing Menu

\*RE-SUBMIT\*

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date of submission 12/18



December 22, 2009

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

WIRE ROPE INDUSTRIES, INC.  
5501 TRANSCANADIENNE HWY.  
POINTE-CLAIRE, QUEBEC H9R 1B7  
POINTE-CLAIRE, H9R 1-B7CA

SUBJECT: WIRE ROPE INDUSTRIES, INC.  
REF: F00000003670

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

If the corporation is a PROFIT corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

If the corporation is a NOT FOR PROFIT corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts  
Regulatory Specialist II

FAX Aud. #: H09000260873  
Letter Number: 109A00038895

2009 DEC 23 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

P.O. BOX 6327 - Tallahassee, Florida 32314

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** WIRE ROPE INDUSTRIES INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** 00000003670

The enclosed withdrawal application and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOHANNE TREMBLAY  
(Name of Person)

WIRE ROPE INDUSTRIES INC.  
(Firm/Company)

5501 TRANS. CANADA HIGHWAY  
(Address)

POINTE-CLAIRE QUEBEC CANADA H9R 1B7  
(City/State and Zip code)

For further information concerning this matter, please call:

JOHANNE TREMBLAY at (514) 426-6403  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**MAILING ADDRESS:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

WIRE ROPE INDUSTRIES INC.

(Name of Corporation)

00000008870

(Document Number of Corporation (if known))

Delaware

(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 for the corporation:

5501 trans-canada

(Mailing Address)

pointe-claire, quebec, canada, h9r 1b7

(City/ State /Zip)

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

  
Signature of a director, president or other officer - If in the hands of a  
receiver or other court appointed fiduciary, by that fiduciary

Robert Kessler

(Typed or printed name of person signing)

Dec - 7, 2009  
CORPORATE MANAGER  
(Title of person signing)

FILING FEE \$35