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From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number

: (850)878-5368

DISSOLUTION OR WITHDRAWAL WILBUR SMITH ASSOCIATES, INC.

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COVER LETTER

TO:	Amendment Section	
1	Division of Corporations	
SUBJE	ECT: WILBUR SMITH ASSOCIATES, INC.	
	(Nam	e of Corporation)
DOCUN	MENT NUMBER: 818433	
The enc	closed withdrawal application and fee are	submitted for filing.
	return all correspondence concerning this to the following:	•
	Patricia Wilson	
	(Nam	e of Person)
	Camp Dresser & McKee, Inc.	
	(Fim	(Company)
	50 Hampshire Street	
	(/	Address)
	Cambridge, Massachusetts 02139	· ·
	(City/Stat	te and Zip code)
For furth	ther information concerning this matter, plea	ase cali:
	OI at	(Area Code & Daytime Telephone Number)
	(Name of Person)	(Area Code & Daytime Telephone Number)
	STREET ADDRESS:	MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

WILBUR SMITH ASSOCIATES, INC.	
(Name of Corporation)	
	12 JAN 18
818433	₹ ?
(Document Number of Corporation (if known)	4
·	Z
Delaware	(c)
(Incorporated Under Laws of)	7
	-
This corporation is no longer transacting business or conducting affairs within the State of Florida and 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 beha appoints the Department of State as its agent for service of process based on a cause of action arising duritime it was authorized to transact business or conduct affairs in Florida.	df and
The following is a current mailing address for the corporation:	
One Cambridge Place S0 Hampshire Street	
(Mailing Address)	
Cambridge, Massachusetts 02139	
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the future of any change in its mailing address	i.
January /72012	
(Signature of a director, president/or other officer - if in the hands of a (Date) neceiver of other court appointed fiduciary, by that fiduciary)	
TAMES S. LACKMAN GENERAL COURS. (Typed or printed name of person signing) (Title of person signing)	<u> </u>

FILING FEE \$35

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