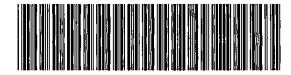
## 836885

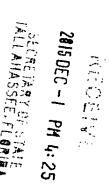
| (Requestor's Name)                      |
|---|
|   |
| (Address)                               |
|   |
| (Address)                               |
|   |
| . (City/State/Zip/Phone #)              |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
|   |
|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



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2016 DEC - 1 AH 9: 47



DEC 02 2014 C. CARROTHERS CORPORATION SERVICE COMPANY 1201 Hays Street

Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 890827 4381522

AUTHORIZATION : Smell of

COST LIMIT : \$/3\s.\00

ORDER DATE: December 1, 2015

ORDER TIME : 2:52 PM

ORDER NO. : 890827-005

CUSTOMER NO: 4381522

## FOREIGN FILINGS

NAME: FAY, SPOFFORD & THORNDIKE,

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: Courtney Williams - EXT# 62935

EXAMINER:

## **COVER LETTER**

| TO:    | Amendment Section Division of Corporations  |                                    |                                   |
|--------|---|------------------------------------|-----------------------------------|
|        | FAY SPOFFORD & THORNDIKE  | , INC.                             |                                   |
| SORM   | <del></del>   | Name of Corporation                | ))                                |
| DOCU   | UMENT NUMBER: 836885  |                                    |                                   |
| The en | nclosed withdrawal application and fe   | e are submitted for fil            | ling.                             |
|        | return all correspondence concerning t to the following:  | his                                |                                   |
|        | CRYSTAL LUCKWELL  |                                    |                                   |
|        | Division of Corporations  ECT: FAY, SPOFFORD & THORNDIKE, INC.  (Name of Corporation)  MENT NUMBER: 836885  closed withdrawal application and fee are submitted for filing.  return all correspondence concerning this to the following:  CRYSTAL LUCKWELL  (Name of Person)  STANTEC  (Firm/Company)  10160 - 112 STREET  (Address)  EDMONTON, AB T5K 2L6 CANADA  (City/State and Zip code)  rther information concerning this matter, please call:  TAL LUCKWELL  (Name of Person)  sed is a check for the amount:  5 Filing Fee \$43.75 Filing Fee \$52.50 Filing Fee,  Certificate of Status  Certified Copy (Additional copy is Enclosed)  MAILING ADDRESS: Amendment Section Division of Corporations  STREET ADDRESS: Amendment Section Division of Corporations |                                    |                                   |
|        | STANTEC   |                                    |                                   |
|        |   | (Firm/Company)                     |                                   |
|        | 10160 - 112 STREET  |                                    |                                   |
|        |   | (Address)                          |                                   |
|        | EDMONTON, AB T5K 2L6 CANADA   |                                    |                                   |
|        | (Ci   | ty/State and Zip code              | )                                 |
| For fu | rther information concerning this matte   | r, please call:                    |                                   |
| CRYS   | TAL LUCKWEŁL  | 780 3                              | 946349                            |
| Enclos | (Name of Person) sed is a check for the amount:   |                                    | le & Daytime Telephone Number)    |
| \$35   |   | Certified Copy (Additional copy is | Certificate of Status & Certified |
|        | Amendment Section   |                                    | Amendment Section                 |

Tallahassee, FL. 32301

Tállahassee, FL.32314

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

| FAY, SPOFFURD & I HURNUIKE, INC.   |  |  |  |
|--|--|--|--|
| (Name of Corporation)  |  |  |  |
| 836885   |  |  |  |
| (Document Number of Corporation (if known)   |  |  |  |
| MASSACHUSETTS  |  |  |  |
| (Incorporated Under Laws of)   |  |  |  |
| this corporation is no longer transacting business or conducting affairs within the State of Florida and here coluntarily 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 a popoints the Department of State as its agent for service of process based on a cause of action arising during time it was authorized to transact business or conduct affairs in Florida.  The following is a current mailing address for the corporation: |  |  |  |
| 10160 - 112 STREET   |  |  |  |
| (Mailing Address)  |  |  |  |
| EDMONTON, AB T5K 2L6 CANADA  |  |  |  |
| (City/ State /Zip)   |  |  |  |
| The corporation agrees to notify the Department of State in the future of any change in its mailing address.    December   . 2015     (Date)     (Date)  |  |  |  |
| JENNIFER A.I. ADDISON SECRETARY  |  |  |  |
| (Typed or printed name of person signing) (Title of person signing)  |  |  |  |

FILING FEE \$35