

FO1000004414

(Requestor's Name)

(Address)

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**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ATLANTIC LADDER SERVICE INC.  
(Name of corporation)

**DOCUMENT NUMBER:** F01000004414

The enclosed withdrawal application and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

BONNIE PETERSON  
(Name of Person)

ATLANTIC LADDER SERVICE INC.  
(Firm/Company)

P.O. BOX 1629  
(Address)

PLEASANT VALLEY, NY 12569  
(City/State and Zip code)

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For further information concerning this matter, please call:

BONNIE PETERSON at ( 845 ) 635-4170  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Amendment Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL. 32399

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

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

ATLANTIC LADDER SERVICE INC.  
(Name of Corporation)

NEW YORK STATE  
(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:

P.O. BOX 1629

(Mailing Address)

PLEASANT VALLEY, NY 12569-1629  
(City/ State /Zip)

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

Bonnie Peterson SECRETARY/TREASURER  
Signature of the chairman or vice chairman of the board, Title  
president, or any officer, or if the corporation is in the hands of a  
receiver, trustee, or other court-appointed fiduciary, by that fiduciary.

BONNIE PETERSON  
Typed or printed name

12/23/02  
Date

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FLORIDA  
DEPARTMENT OF STATE