## F02000006083

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ALLAHASSEE FLORIDA



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## TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: Weather-Shield International, Inc.	
(Name of corporation)	
DOCUMENT NUMBER: F02000006083	
The enclosed withdrawal application and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
David C. Lapp, CPA	
(Name of Person)	
David C. Lapp, CPA	
(Firm/Company)	
256 Third Street - Suite 34	
(Address)	
Niagara Falls, NY 14303-1345	
(City/State and Zip code)	
For further information concerning this matter, please call:	
David C. Lapp, CPA at (716 ) 285-8610	<u>,, , , , , , , , , , , , , , , , , , ,</u>
(Name of Person) (Area Code & Daytime Telephone Number)	
STREET ADDRESS: Amendment Section Division of Corporations 409 E. Gaines St.  MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327	

Tallahassee, FL. 32399

Tallahassee, FL. 32314

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

Weather-Shield International, Inc.
(Name of Corporation)
F0200006083 (Document Number of Corporation (if known)
New York
(Incorporated Under Laws of)
This corporation is no longer transacting business or conducting affairs within the State of Florida and here 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 at appoints the Department of State as its agent for service of process based on a cause of action arising during t 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 2444  (Mailing Address)
Niagara Falls, NY 14302 (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)  (Date)
Peter Turner President (Typed or printed name of person signing) (Title of person signing)
(Typed of princed faute of person signing)

FILING FEE \$35