

F04000005897

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

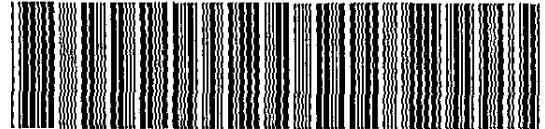
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Capital Glass Company  
(Name of Corporation)

DOCUMENT NUMBER: F04000005897

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this  
matter to the following:

Christopher A. Cox Sr.

(Name of Person)

Capital Glass Company

(Firm/Company)

3605 North West Street

(Address)

Jackson, MS 39216

(City/State and Zip code)

For further information concerning this matter, please call:

Amy Goodwin

(Name of Person)

at ( 601 ) 982-0328

(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

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

FILED  
05 NOV 18 PM 4:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Capital Glass Company  
(Name of Corporation)

F04000005897  
(Document Number of Corporation (if known))

State of Mississippi  
(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 31393  
(Mailing Address)

Jackson, MS 39286-1393  
(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)

November 3, 2005  
(Date)

Christopher A. Cox Sr.  
(Typed or printed name of person signing)

President  
(Title of person signing)

**FILING FEE \$35**