(Re	questor's Name)	
(Ac	ldress)	
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(Cit	ty/State/Zip/Phone	:#)
PICK-UP	WAIT	MAIL
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SECRETARY OF STORY

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COVER LETTER

TO: Amendment Section Division of Corporations		
FRNEST P BREALLY ELECTRICA	L INC.	
SUBJECT:	(Name of Corporation)	
DOCUMENT NUMBER:		
The enclosed withdrawal application and fe	ee are submitted for filing.	
Please return all correspondence concerning matter to the following:	this	
BETH CHAMPAGNE		
	(Name of Person)	
ERNEST P. BREAUX ELECTRICAL INC	C.	
	(Firm/Company)	
P O BOX 11640		
	(Address)	
NEW IBERIA LA 70562		
(Ci	ty/State and Zip code)	
For further information concerning this matter	er, please call:	
_	at (337) 364-8183	
(Name of Person) Enclosed is a check for the amount:	(Area Code & Daytime Telephone Number)	
\$35 Filing Fee \$\int \\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & \$52.50 Filing Fee, Certified Copy (Additional copy is Enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS: Amendment Section	STREET ADDRESS: Amendment Section	

Division of Corporations P.O. Box 6327 Tallahassee, FL.32314 Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL. 32301

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

ERNEST P. BREAUX ELECTRICAL INC.			
(Name of Corporation	on)	_	
F060000	00578		
(Document Number of Corporat	tion (if known)	_	
LOUISIANA		_	
(Incorporated Under La	aws of)	-	
This corporation is no longer transacting business or conducting voluntarily surrenders its authority to transact business or conducting to transact business or conduct appoints the Department of State as its agent for service of problem it was authorized to transact business or conduct affair. The following is a current mailing address for the corporation: POBOX 11640	fuct affairs in Florida. t in Florida to accept service on its rocess based on a cause of action aris rs in Florida.	behalf sing do	f and uring STCPCTARY
(Mailing Address)		_ E	ŽC.
NEW IBERIA LA 70562		展9日:28	STATE OF
(City/ State /Zip)		_	. *
The corporation agrees to notify the Department of State in the Signature of a differor, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	e future of any change in its mailing ac	dress	_
Lab Mad	l o /29/14	ddress	

FILING FEE \$35