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withdrawal TB

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: C & R HENRY INVESTMENTS LIMITED CORP.

(Name of Corporation)

DOCUMENT NUMBER: F0700000416

The enclosed withdrawal application and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

S. L. RICHARD BRUNTON

(Name of Person)

BRUNTON REGISTERED AGENTS

(Firm/Company)

4710 NW 2ND AVENUE, #101

(Address)

BOCA RATON FL 33431

(City/State and Zip code)

For further information concerning this matter, please call:

S.L. RICHARD BRUNTON

_{t (} 561) 241-999

(Name of Person)

(Area Code & Daytime Telephone Number)

MAILING ADDRESS:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET 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

C & R HENRY INVESTMENTS LIMITED CORP. 🦼 🧃
(Name of Corporation)
THE 23
F0700000416
(Document Number of Corporation (if known)
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CANADA
(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:
44 ASHFIELD DRIVE
(Mailing Address)
ETOBICOKE ON CANADA M9C 4T9
(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)
Colleen Henry (Typed or printed name of person signing) (Title of person signing)

FILING FEE \$35