F11000000711

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(Business Entity Name)	
(Document Number)	
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COVER LETTER Amendment Section **Division of Corporations** F. W. Bryce, Inc. SUBJECT: (Name of Corporation) F1100000711 **DOCUMENT NUMBER:** The enclosed withdrawal application and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Kerry Lewis (Name of Person) F.W. Bryce, Inc. (Firm/Company) 8 Pond Rd (Address) Gloucester, MA 01930 (Citv/State and Zip code) For further information concerning this matter, please call: 304-6370)_____ Kerry Lewis at (_____ (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for the amount: ⊠ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee. Certificate of Status & Certified Certificate of Status Certified Copy

Copy (Additional copy is enclosed) (Additional copy is Enclosed) Street Address: Mailing Address: Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314 Tallahassee, FL 32303

TO:

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

F. W. Bryce, Inc.

(Name of Corporation)

F11000000711

(Document Number of Corporation (if known)

MASSACHUSETTS

(Incorporated Under Laws of and date authorized to transact business/conduct its affairs)

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:

8 Pond Rd		
	(Mailing Address)	
Gloucester, MA 01930		W
	(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)

Kerry Lewis

9/	14	12022	
	(C	Pate [®]	

(Typed or printed name of person signing)

Officer - Secretary

(Title of person signing)

FILING FEE \$35