

F14 000000 188

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

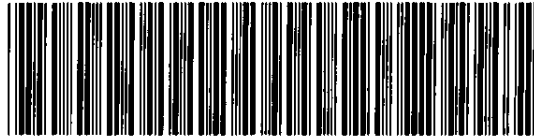
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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RECEIVED  
DEPARTMENT OF STATE  
17 MAR - 6 PM 4:01


SECRETARY OF STATE  
MAIL ROOM

2017 MAR - 6 AM 8:10

FILED

3/7cm  
con ap with

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 532553 4381522  
AUTHORIZATION :   
COST LIMIT : \$ 35.00

ORDER DATE : March 3, 2017

ORDER TIME : 3:42 PM

ORDER NO. : 532553-055

CUSTOMER NO: 4381522

FOREIGN FILINGS

NAME: BURY HOU, INC.

XX CORPORATE  
       LIMITED PARTNERSHIP  
       LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XXX PLAIN STAMPED COPY  
       CERTIFICATE OF STATUS

CONTACT PERSON: Melissa Zender - EXT#

EXAMINER: \_\_\_\_\_

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

BURY - HOU, INC

(Name of Corporation)

F14000000188

(Document Number of Corporation (if known))

TEXAS

(Incorporated Under Laws of)

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CLERK OF STATE  
TAMPA FLORIDA

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:

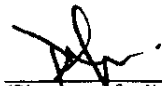
10160 112 STREET NW

(Mailing Address)

EDMONTON, AB T5K2L6 CANADA

(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)

FEBRUARY 15, 2017

(Date)

PAUL J.D. ALPERN

(Typed or printed name of person signing)

SENIOR VICE PRESIDENT

(Title of person signing)

**FILING FEE \$35**