

F14000000533

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

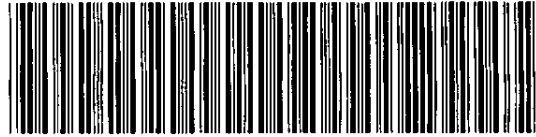
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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14 JUL 18 AM 11:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

14 JUL 18 AM 10:55

DEPARTMENT OF REVENUE

5102 1 2 7001

T. LEMIEUX

[Handwritten signature]



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 133933 7728905

AUTHORIZATION : *[Signature]*

COST LIMIT : \$ 35.00

ORDER DATE : May 15, 2014

ORDER TIME : 5:29 PM

ORDER NO. : 133933-010

CUSTOMER NO: 7728905

FOREIGN FILINGS

NAME: MASON, BRUCE & GIRARD, INC.

XX CORPORATE
 LIMITED PARTNERSHIP
 LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF STATUS

CONTACT PERSON: Courtney Williams - EXT# 62925

EXAMINER: _____

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

MASON, BRUCE & GIRARD, INC.

(Name of Corporation)

F14000000533

(Document Number of Corporation (if known))

OREGON

(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:

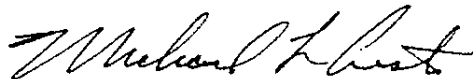
707 SW Washington Street, Suite 1300

(Mailing Address)

Portland, OR 97205-3536

(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)

6/23/14

(Date)

MICHAEL L. LESTER

(Typed or printed name of person signing)

COO/Corporate Sec.

(Title of person signing)

FILING FEE \$35