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P.O. Box 6327

	COVER LETTER
TO: Amendment Section Division of Corporations	
SUBJECT: BFC Staffing Solutions Inc.	
	(Name of Corporation)
DOCUMENT NUMBER:	
The enclosed withdrawal application and	fee are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
Matthew Fredericks	
	(Name of Person)
Bridgeforce LLC	
	(Firm/Company)
225 Wilmington West Chester Pike Suite	202
~ <b>=</b> -	(Address)
Chadds Ford, PA, 19317	
(C	City/State and Zip code)
For further information concerning this mat	ter, please call:
Matthew Fredericks	302 3886913 at ( )
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the amount:	
■ \$35 Filing Fee □ \$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 Division of Corporations	Street Address: Amendment Section Division of Corporations

The Centre of Tallahassee

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

BFC Staffing Solutions Inc.	·
(Name of Corporation)	
TILICOCOQ83  (Document Number of Corporation	(if known)
(Incorporated Under Laws of and date authorized to transa	act business/conduct its affairs)
This corporation is no longer transacting business or conducting voluntarily surrenders its authority to transact business or conduct. This corporation revokes the authority of its registered agent in appoints the Department of State as its agent for service of process time it was authorized to transact business or conduct affairs in Florida.	t affairs in Florida.  1 Florida to accept service on its behalf and shared on a cause of action arising during the
The following is a current mailing address for the corporation:	2024 JUL 18
225 Wilmington West Chester Pike Suite 202	
(Mailing Address)	
Chadds Ford, PA, 19317	F11 6: C
(City/ State /Zip)	<del></del>
The corporation agrees to notify the Department of State in the fut  Matt Williams	ture of any change in its mailing address.
(Signatulic of a fillector, president or other officer - if in the hands of a	(Date)
receiver or other court appointed fiduciary, by that fiduciary)	
Matt Williams	Controller
(Typed or printed name of person signing)	(Title of person signing)