

F14000003644

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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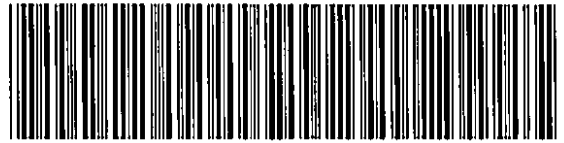
(Business Entity Name)

(Document Number)

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**CORPORATE
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DISSOLUTION

2019 JAN -8
PM 4:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. **BRIGADE FIRE PROTECTION, INC.**

(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BRIGADE FIRE PROTECTION I, INC.
(Name of Corporation)

DOCUMENT NUMBER: F14000003644

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this
matter to the following:

SCOTT KOS

(Name of Person)

Registered Agent Solutions, Inc.

(Firm/Company)

1701 Directors Blvd. Suite 300

(Address)

Austin, TX 78744

(City/State and Zip code)

For further information concerning this matter, please call:

SCOTT KOS

(Name of Person)

at (888) 705-7274

(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 & 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
P.O. Box 6327
Tallahassee, FL.32314

STREET ADDRESS:

Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL. 32301

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA