F200000545H

(Requestor's Name)
(Nequestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(bocument Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
MAY 2 1 2025
1

Office Use Only



800444528708

2025 HAT 20 PH 3: 08

2025 HAY 20 AH 10: C

THE OFFICE OF THE OFFI

Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com



ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com

FROM Melissa Moreau mmoreau@incserv.com 850.656.7953

REQUEST DATE 5/20/2025

850-245-6051

PRIORITY Regular Approval

OUR REF # (Order ID#) 1378829

ORDER ENTITY

BELL LUMBER & POLE COMPANY

PLEASE PERFORM THE FOLLOWING SERVICES: BELL LUMBER & POLE COMPANY (FL)

File the attached withdrawal document

NOTES:

\$35.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:_____

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Tuesday, May 20, 2025 Page 1 of 1

COVER LETTER

Division of Corporations	
SUBJECT: Bell Lumber & Pole Company	
	(Name of Corporation)
DOCUMENT NUMBER: F20000005454	l
The enclosed withdrawal application and	d fee are submitted for filing.
Please return all correspondence concerni	ng this matter to the following:
Pamela Uran	
	(Name of Person)
c/o Fredrikson & Byron, P.A.	
	(Firm/Company)
60 South 6th Street, Suite 1500	
	(Address)
Minneapolis, MN 55402	
	(City/State and Zip code)
For further information concerning this m	atter, please call:
Pamela Uran	at (612 492-7731
(Name of Person)	(Area Code & Daytime Telephone Number)
Englosed is a check for the amount:	
☑ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	& 🗆 \$43.75 Filing Fee & 🗆 \$52.50 Filing Fee, Solution Copy (Additional copy is Enclosed) & 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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

Bell Lumbe	r & Pole Company	
	(Name of Corporation	
F20000005	451	on (if known)
F 200000003		
	(Document Number of Corporation	in (if known)
Minnesota	12/2/2020	
(Inco	rporated Under Laws of and date authorized to trans	sact business/conduct its affairs)
	no longer transacting business or conducting ers its authority to transact business or conduc	affairs within the State of Florida and hereby et affairs in Florida.
appoints the Departs		in Florida to accept service on its behalf and ss based on a cause of action arising during the florida.
The following is a c	urrent mailing address for the corporation:	
778 First St	reet NW	
	(Mailing Address)	<u> </u>
New Bright	on. MN 55112	
	(City/ State /Zip)	
The corporation agr	ees to notify the Department of State in the fi	uture of any change in its mailing address.
Docusigned by	2.11	May 19, 2025
(Signature of a creceiver or other	lirector, president or other officer - if in the hands of a er court appointed fiduciary, by that fiduciary)	(Date)
Thomas R. Be	ell	Director
	or printed name of person signing)	(Title of person signing)

FILING FEE \$35