

F94 000000 118

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

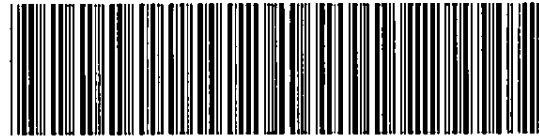
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
MAR - 3 2025

Office Use Only



000444436790

FILED
2025 FEB 28 AM 11:13

RECEIVED
2025 FEB 28 PM 3:45
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

CT CORP
(850) 656- 4724
3458 lakesore Drive
Tallahassee, FL 32312

Date: 02/28/2025
Acc#120160000072

en: c 15/11

Name:	Weir Slurry Group, Inc.
Document #:	
Order #:	16131812

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input type="checkbox"/>
	Plain: <input checked="" type="checkbox"/>
	COGS: <input type="checkbox"/>

Email Address for Annual Report Notifications:

--

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ **35.00**

Thank you!

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: WEIR SLURRY GROUP, INC.

(Name of Corporation)

DOCUMENT NUMBER: F94000000778

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

Please return all correspondence concerning this matter to the following:

Judy Raab

(Name of Person)

(Firm/Company)

777 Main Street, Suite 2050

(Address)

Fort Worth, TX 76102

(City/State and Zip code)

For further information concerning this matter, please call:

Judy Raab

at (817) 228-7215

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
Enclosed) | <input type="checkbox"/> \$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
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

WEIR SLURRY GROUP, INC.

(Name of Corporation)

F94000000778

(Document Number of Corporation (if known))

Wisconsin

(Incorporated Under Laws of and date authorized to transact business/conduct its affairs)

FILED
2025 FEB 28 AM 11:13
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF
DADE, 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:

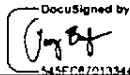
4927 W 2400 S, SUITE 100

(Mailing Address)

WEST VALLEY CITY, UT 84120

(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

DocuSigned by:

545F08701334439

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

2/20/2025

(Date)

Jeremy Burroughs

(Typed or printed name of person signing)

Vice President

(Title of person signing)

FILING FEE \$35