4/15/2016 11:54:23 AM From: To: 8506176380(1/3)

Florida Department of State Division of Corporations

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Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (850)205-8842 Fax Number : (850)878-5368

DISSOLUTION OR WITHDRAWAL JACO ROOFING & CONSTRUCTION, INC.

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COVER LETTER

TO:	Amendment Section Division of Corporations				
SUBJ	JACO ROOFING & CONSTRUCTIO	N, INC.			
00110		Name of Corporatio	n)		
DOC	UMENT NUMBER: F96000000217		·		
The er	nclosed withdrawal application and fe	e are submitted for fi	iling.		
	e return all correspondence concerning the to the following:	nis .			
	JO LYNN ELLIS				
		(Name of Person)	,		
JACO ROOFING & CONSTRUCTION, INC.					
		(Firm/Company)			
	P. O. BOX 937				
		(Address)			
	CLUTE, TX 77531				
	(Cit	y/State and Zip code)		
For fu	rther information concerning this matter	, please call:			
JO LY	nn ellis	979 2. at ()	65-6101		
Enclos	(Name of Person) sed is a check for the amount:	(Area Cod	le & Daytime Telephone Number)		
× \$35		\$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed)	\$52.50 Filing Fcc, Certificate of Status & Certified Copy (Additional copy is enclosed)		
	MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327		STREET ADDRESS: Amendment Section Division of Corporations 2661 Executive Center Circle		

Tallahassee, FL. 32301

Tallahassee, FL.32314

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

	THE ROOFING & CONSTRUCTION, INC.			
	(Name of Corporation	n)		
	F96000000217			
	(Document Number of Corporation	m (if known)	,	
	Texas			
	(Incorporated Under Law	rs of)		-
appoint the time	orporation revokes the authority of its registered agent its the Department of State as its agent for service of proce it was authorized to transact business or conduct affairs flowing is a current mailing address for the corporation:	cess based on a cause of ac	on its tion aris	behalf a sing duri
	P. O. BOX 937		الم الم	201
	(Mailing Address)			
			•	- 15 T
	CLUTE, TX 77531			_ U 1 .
	(City/ State /Zip)			
The cor	poration agrees to notify the Department of State in the fi	nture of any change in its ma	iling ad	dress.
	(Signature of a prector, president or other officer - if in the hands of a	04/13/2016 (Date)		
	(Signatury of a theotor, president or other officer - if in the hands of a received or other court appointed fiduciary, by that fiduciary)	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	JO LYNN ELLIS	SECR-TREAS		
	Tracel or printed papes of person ciming)	(Title of person si	anina)	

FILING FEE \$35