## Florida Department of State Division of Corporations **Electronic Filing Cover Sheet**

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## DISSOLUTION OR WITHDRAWAL MATERION BRUSH INC.

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## **COVER LETTER**

TO:	Amendment Section Division of Corporations		
CTTO I	ECT: MATERION BRUSH INC.		
SUBJ	ECT: MATERION BROSH INC.	(Name of Corporation	n)
DOC	UMENT NUMBER: F98000004010		
The e	nclosed withdraws! application and	fee are submitted for fi	ling.
	e return all correspondence concerning r to the following:	r this	
		(Name of Person)	
CT CORPORATION			
	<del></del>	(Firm/Company)	
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	(0	City/State and Zip code	<u> </u>
For fu	urther information concerning this mat	tter, please call:	
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Enclo	(Name of Person) sed is a check for the amount:	(Area Cod	le & Daytime Telephone Number)
<b>⊠\$</b> 3	5 Filing Fee \$\int \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed)	Certificate of Status & Certified
	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

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

1	MATERION BRUSH INC.	
-	(Name of Corporation)	<u> </u>
	***	् ज च
	F98000004010	
<u>-</u>	(Document Number of Corporation (if known)	— 꽁
	,	0 1
		134 %
_	OHO	
	(Incorporated Under Laws of)	
		6:48
	pration is no longer transacting business or conducting affairs within the State of Florida y surrenders its authority to transact business or conduct affairs in Florida.	and hereby
appoints th	oration revokes the authority of its registered agent in Florida to accept service on its he Department of State as its agent for service of process based on a cause of action aris was authorized to transact business or conduct affairs in Florida.	
me mue ii	was authorized to transact ousiness of conduct attains in Plonda.	
The follow	ving is a current mailing address for the corporation:	
6	5070 PARKLAND BLVD.	
_	(Mailing Address)	<del></del>
,	MAYFIELD HEIGHTS, OHIO 44124	
	(City/ State /Zip)	
The corpor	ration agrees to notify the Department of State in the future of any change in its mailing a	ddress.
•		
	3/30/2015	
(Sig	gnature of a director, president or other officer - if in the hands of a (Date) ceiver or other could appointed fiduciary, by that fiduciary)	
	91CHAEL HAS YCHAK UP TREASURER - (Typed or printed name of person signing) (Title of person signing)	SECRETARI
	(Typed or printed name of person signing) (Title of person signing)	

**FILING FEE S35**