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SECRETARY OF STATE

OCT 23 2013

R. WHITE

COVER LETTER

	endment Section sion of Corporations		
SUBJECT:	Haverhill Cable & Ma	nufacturing Corp. (Name of Corporation	
DOCUME	NT NUMBER:F98000005	134	
The enclose	d withdrawal application and f	ee are submitted for fi	ling.
Please return matter to the	n all correspondence concerning e following:	this	
	Sandra Casey		
-		(Name of Person)	
	Haverhill Cable & Ma	nufacturing Corp.	
		(Firm/Company)	
	159 Ferry Road		
		(Address)	
	Haverhill, MA 01835		
	(C	ity/State and Zip code)	
For further i	nformation concerning this matte	er, please call:	
	(Name of Person) a check for the amount:	at (978) (Area Cod	372 - 638L e & Daytime Telephone Number)
x \$35 Filin	g 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:		STREET ADDRESS:
	Amendment Section Division of Corporations		Amendment Section Division of Corporations
	P.O. Box 6327		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

Haverhill Cable & Manufacturing Corp. (Name of Corporation)	
F98000005134 (Document Number of Corporation (if known)	
Massachusetts (Incorporated Under Laws of)	
This corporation is no longer transacting business or conducting affairs within the voluntarily surrenders its authority to transact business or conduct affairs in Florida.	
This corporation revokes the authority of its registered agent in Florida to accep appoints the Department of State as its agent for service of process based on a cauthe time it was authorized to transact business or conduct affairs in Florida.	t service on its behalf and use of action arising during
The following is a current mailing address for the corporation:	ALL CALL
159 Ferry Road, PO Box 8222	
(Mailing Address) Haverhill, MA 01835 (City/ State /Zip)	SEE, FLORIDA
The corporation agrees to notify the Department of State in the future of any change	in its mailing address.
	/3013 (Date)
SANDRA CHSE Y (Typed or printed name of person signing) (Title	SUKEN of person signing)

FILING FEE \$35