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: (850)205-8842

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JAN 05 2016

K. WHITE

## DISSOLUTION OR WITHDRAWAL ENVIROCORP WELL SERVICES INC.

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: ENVIROCORP WELL SERVICES INC.
(Name of Corporation)
DOCUMENT NUMBER: F99000002086
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Person)
ENVIROCORP WELL SERVICES INC.
(Firm/Company)
(Address)
(City/State and Zip code)
For further information concerning this matter, please call:
(Name of Person) at ()  Enclosed is a check for the amount:  (Area Code & Daytime Telephone Number)
\$35 Filing Fee \$43.75 Filing Fee & \$43.75 Filing Fee & \$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified (Additional copy is Enclosed)  Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations  STREET ADDRESS: Amendment Section Division of Corporations

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL.32314

Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL. 32301

ENVIROCORP WELL SERVICES INC.

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

	(Name of Corporation)			
	F9900002086			
	(Document Number of Corporation (if known)			
	Texas (Incorporated Under Laws of)			
	(mostpotated black black sty			
	orporation is no longer transacting business or conducting affairs within the State of Fl arily surrenders its authority to transact business or conduct affairs in Florida.	orida and	l herel	by
appoin	corporation revokes the authority of its registered agent in Florida to accept service of its the Department of State as its agent for service of process based on a cause of actions it was authorized to transact business or conduct affairs in Florida.			
The fo	llowing is a current mailing address for the corporation:	SEC	5	
	One Penn Plaza	골집	M	-T
	(Mailing Address)	SS.V	<del>†</del>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	New York, NY 10119		2	
	(City/ State /Zip)	ORIDA	AH 3: 52	***/*****
The co	orporation agrees to notify the Department of State in the future of any change in its mai	ling addn	ess.	
	(Signature of a director, president or other officer, if in the hands of a receiver or other court appointed fiduciary, by thus fiduciary)	e		
	Hillary Jassey  Asst. Secretary			
	(Typed or printed name of person signing) (Title of person signing)	ming)		

FILING FEE \$35