MAR<sup>2</sup>30-2005 Division of Con Department of State

P.01/02 Page 1 of 1

Division of Corporations Public Access System

## **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000077342 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone 1 (850)222-1092 Fax Number : (850)222-9428

**ITHDRAWAL OF FOREIGN CORPORATION** 

	<u> </u>
Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

GAYLORD CONTAINER CORPORATION

Westsonia Wing Manu-

**Componets, Filing:** 

Public Access Walk

https://efile.sunbiz.org/scripts/efilcovr.exe

3/30/2005

GAYLORD CONTAINER CORPORATION

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

(Name of Corporation)

:		
P11945	<u></u> _	
(Document Number of	Corporation (if known)	
Delaware		-
; (Incorporated C	Under Laws of)	
This corporation is no longer transacting business or covoluntarily surrenders its authority to transact business of		by
This corporation revokes the authority of its registered appoints the Department of State as its agent for service time it was authorized to transact business or conduct after	of process based on a cause of action arising during the	
The following is a current mailing address for the corpor	ration:	<b>ت</b>
1300 South MoPac	<u></u>	₹
(Mailing	Address)  ARR  OF MARR  OF MAR	
	<del>5</del>	: 07 3.
Austin, TX 78746	30	
(City/ St	ate /Zip)	목일
		ဗ္ကိတ
The corporation agrees to notify the Department of State		ATIONS
i leare pl	3/21/2005	ळ
(Signature of a director, president or other officer -) I in the hands receiver or other court appointed fiduciary, by that fiduciary)	of a (Date)	
Doyle R. Simons	Vice President	
(Typed or printed name of person signing)	(Jule of person signing)	
FILING I	FEE \$35	