



Telephone: 1 877 526-1526 www.bcregistryservices.gov.bc.ca

Mailing Address: PO Box 9431 Stn Prov Govt Victoria BC V8W 9V3

Courier: 200 - 940 Blanshard Street Victoria BC V8W 3E6

INSTRUCTIONS:

Please type or print clearly in block letters and ensure that the form is signed and dated in ink.

Item B Enter the name exactly as shown on the extraprovincial company's Certificate of Registration or enter the name exactly as shown on any change of name certificate or other certificate of registration issued by the registrar in relation to the extraprovincial company.

Item D If the applicant is a corporation or firm, enter the full name of the corporation or firm.

Item E If the applicant is a corporation or firm, this form must be signed by an authorized signing authority for the corporation or firm.

Filing Fee: \$20.00

Submit this form with a cheque or money order made payable to the Minister of Finance, or provide the registry with authorization to debit the fee from your BC OnLine Deposit Account. Please pay in Canadian dollars or in the equivalent amount of US funds.

Freedom of Information and Protection of Privacy Act (FOIPPA): Personal information provided on this form is collected, used and disclosed under the authority of the FOIPPA and the Business Corporations Act for the purposes of assessment. Questions regarding the collection, use and disclosure of personal information can be directed to the Executive Coordinator of the BC Registry Services at 1 877 526-1526, PO Box 9431 Stn Prov Govt, Victoria BC V8W 9V3.

OFFICE USE ONLY - DO NOT WRITE IN THIS AREA

A REGISTRATION NUMBER OF EXTRAPROVINCIAL COMPANY

B NAME OF EXTRAPROVINCIAL COMPANY

C RECORD TO BE WITHDRAWN

Indicate the record to be withdrawn under the Business Corporations Act and the date and time that record was filed. These records can only be withdrawn on the day they are filed.

Notice of Change of Address of Attorney (Form 39) - withdrawn under section 392 YYYY / MM / DD

Filed Date and Time a.m. or p.m. Pacific Time

Notice of Revocation of Appointment of Attorney (Form 40) - withdrawn under section 394 YYYY / MM / DD

Filed Date and Time a.m. or p.m. Pacific Time

D FULL NAME OF APPLICANT

LAST NAME FIRST NAME MIDDLE NAME

CORPORATION OR FIRM NAME

RELATIONSHIP OF APPLICANT TO THE EXTRAPROVINCIAL COMPANY

E CERTIFIED CORRECT - I have read this form and found it to be correct.

NAME OF APPLICANT

SIGNATURE OF APPLICANT

DATE SIGNED

YYYY / MM / DD

X

All withdrawals must be received by the BC Registry Services in sufficient time to process before the record to be withdrawn takes effect.