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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 extrajurisdictional company's Certificate of Registration...
Item C Tick ( ) the box to indicate that the extrajurisdictional company has ceased to carry on business in BC.
Item D This is the signature of the authorized signing authority for the extrajurisdictional company.

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.

OFFICE USE ONLY - DO NOT WRITE IN THIS AREA

A REGISTRATION NUMBER OF EXTRAJURISDICTIONAL COMPANY

B NAME OF EXTRAJURISDICTIONAL COMPANY

C CEASING TO CARRY ON BUSINESS

The extrajurisdictional company has ceased to carry on business in BC and hereby requests that its registration be cancelled.

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

NAME OF AUTHORIZED SIGNING AUTHORITY FOR THE EXTRAJURISDICTIONAL COMPANY

SIGNATURE OF AUTHORIZED SIGNING AUTHORITY FOR THE EXTRAJURISDICTIONAL COMPANY

DATE SIGNED

YYYY / MM / DD

X