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DO NOT MAIL THIS FORM - to BC Registry Service unless you are instructed to do so by registry staff.

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.

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 extrajvincial company's Certificate of Registration, or enter the name exactly as shown on any Change of Name certificate or registration certificate issued by the registrar as a result of an amalgamation of the extrajvincial company.

Item C Tick (v) the box to indicate that the extrajvincial company has ceased to carry on business in BC.

Item D This is the signature of the authorized signing authority for the extrajvincial company. If the authorized signing authority is an attorney for the extrajvincial company and that attorney is a BC company, this form must be signed by an authorized signing authority for that company.

A REGISTRATION NUMBER OF EXTRAJVINCIAL COMPANY

B NAME OF EXTRAJVINCIAL COMPANY

C CEASING TO CARRY ON BUSINESS

[ ] The extrajvincial 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 EXTRAJVINCIAL COMPANY

SIGNATURE OF AUTHORIZED SIGNING AUTHORITY FOR THE EXTRAJVINCIAL COMPANY

DATE SIGNED

YYYY / MM / DD

X