## -M0300000807

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:  3/13 With
M03-807.

Office Use Only



700030319557

03/15/04--01009--005 \*\*25.00



04 MAR 12 AM 9: 37

## TRANSMITTAL LETTER

Registration Section Division of Corporations SUBJECT: L & B IMPROVEMENTS, L.L.C. (Name of Limited Liability Company) FLORIDA REGISTRATION NUMBER: M03000000807 The enclosed withdrawal application and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: STEPHEN J. LOEFFLER (Name of Person) L & B IMPROVEMENTS, L.L.C. (Firm/Company) 3737 SW LINCOLNSHIRE RD (Address) KS 66610 (City/State and Zip Code) For further information concerning this matter, please call: STEPHEN J. LOEFFLER (Name of Person) (Area Code & Daytime Telephone Number) **MAILING ADDRESS:** STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

CR2E057(10/02)

STF FL32235F.2

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

L & B IMPROVEMENTS, L.L.C.
L & B IMPROVEMENTS, L.L.C.  (Name of limited liability company)
KANSAS
(Jurisdiction of its organization)
This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.
This limited liability company revokes the authority of its registered agent to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time is was authorized to transact business in Florida.
3737 SW LINCOLNSHIRE RD  (Mailing address)
TOPEKA, KS 66610 (City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
(Signature of member or authorized representative of a member)
STEPHEN J. LOEFFLER (Typed or printed name of signee)

Filing Fee: \$25.00