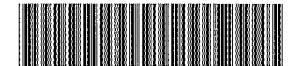
M03000004103

(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:

Office Use Only



100051802021

04/25/05--01049--002 **25.00

PILLED PM 1: 08
2005 APR 25 PM 1: 08
2005 APR 25 PM 1: 08

M3-4103

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Scafco, L.L	corporation)	
DOCUMENT NUMBER: MO3000	204103	
The enclosed withdrawal application and fee a	re submitted for filing.	
Please return all correspondence concerning this matter to the following:	;	÷
Jessica Skellett (Name of Person)	<u></u>	
Turner Industries Group (Firm/Company)	bL.L.C.	
P.O. Box 2750	_ va.	
(Address)	•	
Baton Rouge, LA 70821	•	,
(City/State and Zip code)		
For further information concerning this matter, p	please call:	
Jessica Skellett	at (
(Name of Person)	(Area Code & Daytime Telepho	one Number)
STREET ADDRESS:	MAILING ADDRESS:	<u> </u>
Amendment Section	Amendment Section	
Division of Corporations 409 E. Gaines St.	Division of Corporations P.O. Box 6327	APR

Tallahassee, FL. 32314

Tallahassee, FL. 32399

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

Scafco, L.L.C.
(Name of limited liability company)
Louisiana (Jurisdiction of its organization)
(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 it was authorized to transact business in Florida.
8687 United Plaza Blud. (Mailing address)
Baton Rouge LA 70809 (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)
<u>Lester</u> Griffon, Jr. (Typed or printed name of signee)

Filing Fee: \$25.00