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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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D. BRUCE

FEB 1 3 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: TAPSCAN, LLC (Name of Foreign Limited Liability Company)			
Dear Sir or Madam:			
The enclosed withdrawal and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
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PAMELA R. BARTLETT		•	
(Name of Person)			
TAPSCAN, LLC			
(Firm/Company)	Z.		
	EC.)8 F	-
3000 GALLERIA TOWERS - SUITE 850	ARE T	93	
(Address)	AR)	သ	(File
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BIRMINGHAM, AL 35244	FLO	ယ	la a
(City/State and Zip Code)	RIF DATE	PH 3: 04	
For further information concerning this matter, please call:			
PAMELA R. BARTLETT at (205) 987-7456			
(Name of Person) (Area Code & Daytime Telephone Number)			
STREET/COURIER ADDRESS: MAILING ADDRESS:			
Registration Section Registration Section Division of Corporations Division of Corporations			
Clifton Building P.O. Box 6327			
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301			
Enclosed is a check for the following amount:			
\$25 Filing Fee \$30 Filing Fee & \$55 Filing Fee & \$60 Filing Fee,			
Certificate of Status Certified Copy Certificate of Status & Certified Copy			

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

TAPSCAN, LLC
(Name of limited liability company)
ALABAMA (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.
3000 GALLERIA TOWERS - SUITE 850 (Mailing address)
BIRMINGHAM, AL 35244 (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)
GARY COATS (Typed or printed name of signee)

Filing Fee: \$25.00