## M0500002826

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	·
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Ви	ısiness Entity Nan	ne)
(Do	ocument Number)	
(50	;	
Certified Copies	_ `Certificates	of Status
Special Instructions to	Filing Officer:	
····	Office Use Onl	v



500095469255

04/03/07--01018--029 \*\*25.00

O7 APR -3 PH 12: 04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Guilgen APR 0.4 2007

## **COVER LETTER**

Registration Section

TO:

Division of Corporations			
SUBJECT: PREMIUM PAPER HOL	DCO, LLC		
(Name of Foreign Limited Liability Company)			
5			
Dear Sir or Madam:			
The enclosed withdrawal and fee(s) are submitted fo	r filing.		
Please return all correspondence concerning this mat	ter to the following:		
Harold Roppel			
(Name of Person)			
SMART PAPERS HOLDINGS LLC			
(Firm/Company)			
COA NODILL D. CIDEET			
601 NORTH B STREET (Address)			
(Address)			
HAMILTON, OH 45013			
(City/State and Zip Code)			
For further information concerning this matter, pleas	e call·		
To famile information concerning this matter, please call.			
Harold Roppel	at (513)869-5117		
(Name of Person)	(Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations  Clifton Building  Division of Corporations P.O. Box 6327			
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 & \$\infty\$\$\$ \$60 Filing Fee,		
	Certified Copy Certificate of Status &		
	Certified Copy		

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

PREMIUM PAPER HOLDCO, LLC	
(Name of limited liability company)	
DELAWARE	
(Jurisdiction of its organization)	
This limited liability company is no longer transacting business in Florida ar authority to transact business in this state.	nd surrenders its
This limited liability company revokes the authority of its registered agent to a its behalf and appoints the Department of State as its agent for service of procause of action arising during the time it was authorized to transact business in F	ccept service on cess based on a lorida.
601 NORTH B STREET	
(Mailing address)	,
HAMILTON, OH 45013	
(City/State/Zip)	
The limited liability company agrees to notify the Department of State in the change in its mailing address.	ne future of any
(Signature of member or authorized representative of a member)	97 AE(SE(
DANIEL MAHEU	APR AH
(Typed or printed name of signee)	SS J
(Typed of printed name of signee)	E.C.)
	7.7.2 1.7.2
	02
	PA III 10

Filing Fee: \$25.00