M07000005272

(F	Requestor's Name)
(/	Address)
· (/	Address)
(0	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(I	Business Entity Name)
<u>(</u>	Document Number)
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T. HAMPTON

NOV - 2 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: WBS Connect LLC	
(Name of Foreign Limited Liability	y 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	ng:
Justin W. Maronn	
(Name of Person)	
WBS Connect LLC	_
(Firm/Company)	
700 N. Colorado Blvd. Suite 307	_
(Address)	
Denver, CO 80206	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Justin W. Maronn at (720	259-5418
(Name of Person) (Area Code	& Daytime Telephone Number)
	ILING ADDRESS: stration Section
Division of Corporations Division	sion of Corporations
	Box 6327
2661 Executive Center Circle Talla Tallahassee, Florida 32301	hassee, Florida 32314
Enclosed is a check for the following amount:	
\$25 Filing Fee \$30 Filing Fee & \$55 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

(Name of limited liability company)
Foreign LLC in Florida; Colorado
(Jurisdiction of its organization)
M0700005272
(Florida Document Number)
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 or 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.
700 N. Colorado Blvd. Suite 307 (Mailing address)
(Maiting address)
Denver, CO 80206
(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)
Scott Charter
(Typed or printed name of signee)

Filing Fee: \$25.00

SECRETARY OF STATE

SECRET