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SEPARAMETER FLORID

B. BOSTICK
DEC 3 · 2010

**EXAMINER** 



TO:	Registration Section
	Division of Corporation

SUBJECT: Miss	ion Destin, LLC				
		reign Limited Liability	Company)		
Dear Sir or Madam:					
The enclosed withdr	awal and fee(s) are submitte	ed for filing.			
Please return all corr	respondence concerning this	s matter to the following	<b>g</b> :		
Adam S. Metzg	er				
	(Name of Person)		-		
Mission Bay G	roup			<del></del> 4	
	(Firm/Company)		•	SECI ALL/	10 D
3023 N. Clark	Street #106			RE DAY I	DEC -2
	(Address)		-	rri 🕾	P
Chicago, IL 60	0657			STATE	2: 39
	(City/State and Zip Coo	le)	•	IDA 3	3
For further informati	on concerning this matter,	please call:			
Adam S. Metzg	ger	at (858	270-8500		
(N	ame of Person)		Daytime Telephone Nun	nber)	
Registration Division of Clifton Buil 2661 Execu	Corporations	Regist Divisi P.O. B	ING ADDRESS: ration Section on of Corporations Sox 6327 assee, Florida 32314		
Enclosed is a check	for the following amount:				
□ \$25 Filing Fee	■ \$30 Filing Fee & Certificate of Status	☐ \$55 Filing Fee & Certified Copy	20 \$60 Filing Fee, Certificate of Stat Certified Copy	tus &	

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

Mission Destin, LLC
(Name of limited liability company)
an Illinois limited liability company (Jurisdiction of its organization)
M8000005071
(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 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.
3023 N. Clark Street #106
(Mailing address)
Chicago, IL 60657 (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)
Adam S. Metzger
(Typed or printed name of signee)  EURLIARY OF STATE  TO DEC -2 PH 2: 30  STATE  ORIGINAL TO STATE  ORIGINAL

Filing Fee: \$25.00