F09000002994

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phon	e #)
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nai	me)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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KECEIVED

FLORIDA DEPARTMENT OF STATE
Division of Corporations

Partition in the State of Stat

April 8, 2014

JOHN H. KEELER KEELER & ASSOCIATES, INC. 2045 JASPER WAY THE VILLAGES, FL 30162

SUBJECT: KEELER & ASSOCIATES, INC.

Ref. Number: F09000002994

We have received your document for KEELER & ASSOCIATES, INC. and check(s) totaling \$43.75. However, your check(s) and document are being returned for the following:

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6050.

Darlene Connell Regulatory Specialist II

Letter Number: 714A00007524

O THE PROPER FORMS HAVE BEEN COMPLETED AS REDURSTED. (D) OUR CHECK FOR THE FILINGFRE & CERTIFICATE IS ENCLOSED

John Kuch

COVER LETTER

TO: Amendmen Division of	t Section Corporations		
SUBJECT:	KEELER 41	ASSOCIATES (Name of Corporation	INC-
DOCUMENT NU	MBER: <u>F09</u>	1000007994	
The enclosed with	drawal application and f	ee are submitted for file	ling.
Please return all co matter to the follow	rrespondence concerning ving:	this:	
	JOHN. H	(Name of Person)	•
	KEELER	R ASSOCIA	TES INC
		(Firm/Company)	
	2045 J	Firm/Company) AS VEN WAY (Address)	/
		(Address)	
		<i>IAGES</i> , FL ity/State and Zip code)	
	(C	ity/State and Zip code)	
For further informa	ation concerning this matt	er, please call:	
•			701-4117
(Na Enclosed is a check		(Area Cod	201-4117 e & Daytime Telephone Number)
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed)	\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
	ILING ADDRESS:		STREET ADDRESS:
	endment Section ision of Corporations		Amendment Section Division of Corporations
	Boy 6227		2661 Evecutive Center Circle

Tallahassee, FL. 32301

Tallahassee, FL.32314

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

KEELER & ASSOCIATES, Two. (Name of Corporation)	
(Name of Corporation)	
F 0 9 0 0 0 0 0 2 9 9 4 (Document Number of Corporation (if known)	
(Bossins Names of Corporation (in tallown)	
(Incorporated Under Laws of)	
(Incorporated Under Laws of)	
This corporation is no longer transacting business or conducting affairs with	nin the State of Florida and hereby
voluntarily surrenders its authority to transact business or conduct affairs in l	Florida.
This corporation revokes the authority of its registered agent in Florida to	accept service on its behalf and
appoints the Department of State as its agent for service of process based of	
the time it was authorized to transact business or conduct affairs in Florida.	
The following is a current mailing address for the corporation:	·- , .
JO45 JASPER WAY (Mailing Address)	→
(Mailing Address)	20 11
	7 1
THE VILLAUES, FC 32/62	P D
(City/ State /Zip)	
	22
THE VIUAUES, FC 33/62 (City/ State /Zip) The corporation agrees to notify the Department of State in the future of any	change in its mailing address.
$\bigcap D I I I I I$	4/1
XXI All ook	4/16/14
(Signature of a director, president or other officer - if in the hands of a receiver of other court appointed fiduciary, by that fiduciary)	(Date)
(Typed or printed name of person signing)	SAC TREAS (Title of person signing)
(ryped or printed name or person signing)	(time or berson signing)

FILING FEE \$35