

CT CORPORATION SYSTEM

CORPORATION(S) NAME

**M0000000000230**

HaileyGSP Industrial Services, LLC

0

200003994872--2

-04/12/01--01031--025

\*\*\*\*\*25.00 \*\*\*\*\*25.00

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|--|--|---|
| <input type="checkbox"/> Profit              | <input type="checkbox"/> Amendment                         | <input type="checkbox"/> Merger             |
| <input type="checkbox"/> Nonprofit           | <input checked="" type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark               |
| <input type="checkbox"/> Foreign             | <input type="checkbox"/> Reinstatement                     | <input type="checkbox"/> Other              |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report                     | <input type="checkbox"/> Change of RA       |
| <input type="checkbox"/> LLC                 | <input type="checkbox"/> Name Registration                 | <input type="checkbox"/> UCC                |
| <input type="checkbox"/> Certified Copy      | <input type="checkbox"/> Fictitious Name                   | <input type="checkbox"/> CUS                |
| <input type="checkbox"/> Photocopies         | <input type="checkbox"/> Call When Ready                   | <input type="checkbox"/> Call If Problem    |
| <input type="checkbox"/> Call When Ready     | <input type="checkbox"/> Call If Problem                   | <input type="checkbox"/> After 4:30         |
| <input checked="" type="checkbox"/> Walk In  | <input type="checkbox"/> Will Wait                         | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out            |  |   |

01 APR 12 PM 2:45  
RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

Name \_\_\_\_\_  
 Availability \_\_\_\_\_  
 Document \_\_\_\_\_  
 Examiner \_\_\_\_\_  
 Updater \_\_\_\_\_  
 Verifier \_\_\_\_\_  
 W.P. Verifier \_\_\_\_\_

4/12/01

*cjc*

Order#: 406278

Ref#: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

NOT RETURNED  
 TO ACKNOWLEDGE  
 SUFFICIENCY OF FILING  
 2001 APR 12 AM 11:56  
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 DEPARTMENT OF STATE  
 DIVISION OF CORPORATIONS

660 East Jefferson Street  
 Tallahassee, FL 32301  
 Tel. 850 222 1092  
 Fax 850 222 7615

*OB*  
4-12-01

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

HaileyGSP Industrial Services, LLC

(Name of limited liability company)

Tennessee

(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.

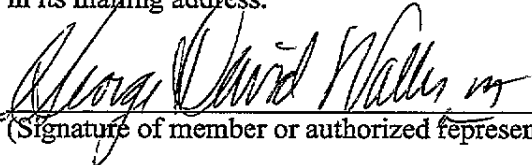
P.O. Box 40646

(Mailing address)

Nashville, TN 37204

(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)

George David Waller, III, President

(Typed or printed name of signee)

**Filing Fee: \$25.00**

01 APR 12 PM 2:15  
APR 12 2011  
11:00 AM  
11:00 AM