

MOD0000000910

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

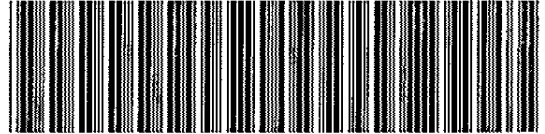
Certified Copies _____

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Special Instructions to Filing Officer:

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02 NOV -7 PM 2:50
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Office Use Only



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11/07/02--01064--022 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 NOV -7 PM 1:18

W11/8

30

CT CORPORATION

November 7, 2002

Secretary of State, Florida
409 East Gaines Street
N/A
Tallahassee FL 32399

Re: Order #: 5717911 SO
Customer Reference 1:
Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Penske Auto Centers, LLC (DE)
Cancellation
Florida

M-910

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
02 NOV - 7 PM 1:18

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at
(850) 222-1092. Thank you very much for your help.

Sincerely,

Katrina Forsman
Fulfillment Specialist
Katrina_Forsman@cch-lis.com

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

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

Penske Auto Centers, LLC

(Name of limited liability company)

Delaware

(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.

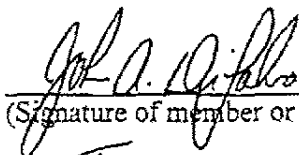
2555 Telegraph Rd.

(Mailing address)

Bloomfield Hills, MI 48302-0954

(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)

JOHN A. DiSALVO

(Typed or printed name of signee)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 NOV - 7 PM 1:18

Filing Fee: \$25.00