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SECRETARY OF STATE
TALLAHASSEE. FLORIDA

D. BRUCE

SEP 2 9 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: RenPlant, L.L.C. (Name of Foreign Limited Liab	ility 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	owing:
Carol Ann Bowman (Name of Person)	
White Lodging Services Corporation, Manage (Firm/Company)	
1000 East 80th Place, Suite 700 North (Address)	SECRETARY OF STATE ALLAHASSEE, FLORIDA
Merrillville, Indiana 46410 (City/State and Zip Code)	PH 1: E. FLOR
For further information concerning this matter, please call:	10 _A
Carol Ann Bowman at 219	
(Name of Person) (Area Co	ode & Daytime Telephone Number)
Registration Section R Division of Corporations D Clifton Building P	AAILING ADDRESS: Legistration Section Division of Corporations O. Box 6327 Callahassee, Florida 32314
Enclosed is a check for the following amount:	
\$25 Filing Fee \$\ \times \\$30 Filing Fee \& \$55 Filing Fee \\ Certificate of Status \tag{Certified Copy}	

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

RenPlant, L.L.C.	
(Name of limited liability company)	
Indiana	
(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.

1000 East 80th Place, Suite 700 North

(Mailing address)

Merrillville, Indiana 46410

(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)

White Lodging Services Corporation, Manager

Carol Ann Bowman, Assistant Secretary

(Typed or printed name of signee)

FILED

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TALLAHASSEE, FLORIDA

Filing Fee: \$25.00