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J. SAULSBERRY **EXAMINER**

AUG 24 2011

COVER LETTER

TO: Registration Division of	n Section f Corporations					
SUBJECT: <u>98</u> [Palms Parent, LLC (Name of Fo	reign Limited Liability	Company)		-	
Dear Sir or Madam:						
The enclosed withdo	rawal and fee(s) are submitt	ed for filing.				
	respondence concerning thi	_	g:			
Debbie L. Slo	oan, Paralegal		_			
	(Name of Person)					
Newton Olda	acre McDonald, Ll	-C	-	SE TAL	201	<i>:</i>
3841 Green	Hills Village Dr., S	Suite 400	-	CRETARY OF AHASSEE, F	2011 AUG 23 AI	
Nashville, TN	N 37215 (City/State and Zip Coo	lo)	-	OF STATE	AM 8: 42	
10 · · 2	(City/State and Zip Cot	<i></i>		.>	8	
For further informati	ion concerning this matter,	please call:				
Debbie L. Slo		at (615	269-5444		_	
· (N	ame of Person)	(Area Code &	Daytime Telephone Number)			
Registration Division of Clifton Buil 2661 Execu	Corporations	Regis Divisi P.O. I	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, Florida 32314			
Enclosed is a check	for the following amount:					
\$25 Filing Fee	\$30 Filing Fee & Certificate of Status	\$55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Copy			

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

98 Palms Parent, LLC
(Name of limited liability company)
Alabama
(Jurisdiction of its organization)
M0100000070
(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.
250 Washington St. (Mailing address)
(Walling addless)
Prattville, AL 37067
(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)
E. H. Camp, III, Asst. VP, Corporate General, Inc., Sole (Typed or printed name of signee) Kender of Member of Services, LLC, Manager Kender of Member of Services, LLC, Manager
FLORATE & CRITICAL CONTROL & CRI

Filing Fee: \$25.00