

NO1 000000107

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

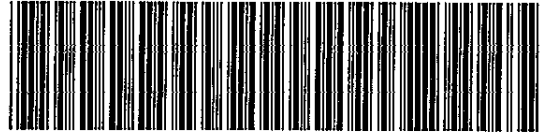
(Business Entity Name)

(Document Number)

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03 MAY 16 PM 3:56
MILWAUKEE, WISCONSIN

5/19
JH

PREMIER CORPORATE SERVICES, INC.

208 South LaSalle Street, Suite 1855
Chicago, IL 60604
(312) 346-3606 (800) 934-2556
Fax: (312) 346-3607

May 12, 2003

VIA Regular Mail

Division Of Corporations
Florida Department Of State
409 E. Gaines Street
Tallahassee, FL 32399

FILED
03 MAY 16 PM 3:56
TALLAHASSEE, FLORIDA

RE: Advanced Mobile Power Systems LLC

Dear Sir or Madam:

On behalf of the above captioned foreign entity, enclosed are the appropriate forms to withdraw the entity, along with our check in payment of the filing fees.

Please file with your office and return the duplicate copy, file stamped, as evidence to my attention at the letterhead address.

If you have any questions, please contact me on our toll-free line at 800-934-2556, prior to returning the documents.

Thank you.

Sincerely,



Michael A. Turano

Encl.

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

ADVANCED MOBILE POWER SYSTEMS, 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.

1400 SMITH ST.

(Mailing address)

HOUSTON, TX 77002

(City/State/Zip)

The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.

R. A. Lydecker *REC*
(Signature of member or authorized representative of a member)

Richard A. Lydecker, Jr., Manager

(Typed or printed name of signee)

Filing Fee: \$25.00

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TAMPA, FLORIDA