

MD1000000430

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

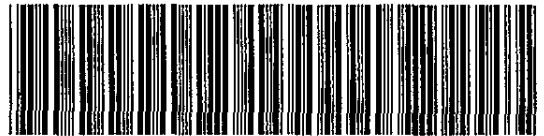
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600064361296

01/24/06 10:48:01 \$30.00

STATE FILING OFFICE
DIVISION OF CORPORATIONS
2006 JAN 24 AM 2:52

A handwritten signature or initials in the bottom right corner of the page.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PYA/MONARCH, LLC
(Name of Foreign Limited Liability 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:

DEIRDRE DOBBINS
(Name of Person)

U.S. FOODSERVICE
(Firm/Company)

9755 PATUXENT WOODS DRIVE
(Address)

COLUMBIA, MD 21046
(City/State and Zip Code)

For further information concerning this matter, please call:

DEIRDRE DOBBINS at (410) 309-6464
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, 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

2006 JAN 24 AM 2:52
 DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS

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

PYA/MONARCH, 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.

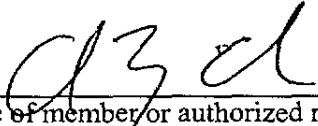
9755 PATUXENT WOODS DRIVE

(Mailing address)

COLUMBIA, MD 21046

(City/State/Zip)

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



(Signature of member or authorized representative of a member)

CHARLES M. INOKON

(Typed or printed name of signee)

FILED
STATE DEPT. OF STATE
DIVISION OF CORPORATIONS
2006 JAN 24 AM 2:52

Filing Fee: \$25.00