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(Re	equestor's Name))
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SECRETARY OF STATE

COVER LETTER

Registration Section

TO:

Division of Corporations		
SUBJECT: Nolan Family L.L.C.		
(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:		
Alicia J. Edwards		
(Name of Person)		
Doerner, Saunders, Daniel & Anderson, L.L.P.		
(Firm/Company)		
320 South Boston Avenue, Suite 500		
(Address)		
Tulsa, OK 74103		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Alicia Edwardsat (_918) 591-5235		
(Name of Person) (Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS: MAILING ADDRESS:		
Registration Section Registration Section		
Division of Corporations Division of Corporations		
Clifton Building P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301		
Enclosed is a check for the following amount:		
✓\$25 Filing Fee & \$30 Filing Fee & \$55 Filing Fee & \$60 Filing Fee,		
Certificate of Status Certified Copy Certificate of Status &		
Certified Copy		

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

Nolan Family L.L.C.
(Name of limited liability company)
Oklahoma
(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.
2431 East 61st Street, Suite 700 (Mailing address)
Tulsa, OK 74103 (City/State/Zip)
RIDA RIDA
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
Jan Hafan II
(Signature of member or authorized representative of a member)
James H. Nolan, II
(Typed or printed name of signee)

Filing Fee: \$25.00