

MD1000000474

(Requester's Name)

VISION-AIR LLC
c/o M. WINZKOWSKI
3020 LEPRECHAUN W.
PALM HARBOR, FL 34683

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

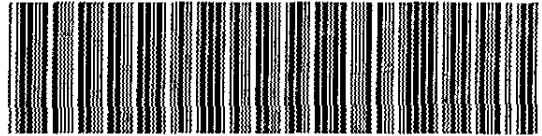
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

5/2 withdrawal

MD1-474

Office Use Only



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MJH

05/05/03--01027--007 **25.00

FILED

03 MAY -2 PM 4:53

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Vision Air LLC – Wilmington, DE

4/29/03

**Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314**

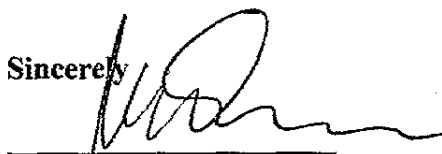
**Re: Vision Air LLC - application to withdraw authority to transact business in FL
for foreign Corporation**

To whom it may concern

This is to notify you that Vision Air LLC, a Delaware company ceased all operations in the State of Florida as of January, 1st 2003. The application for withdraw is attached as well as a check for the filing fees.

The Sales Tax certificate for 2003 has been returned to the appropriate address in Tallahassee.

Sincerely



**Michael Winzkowski
Authorized Representative / Vision Air LLC**

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

VISION-AIR 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.

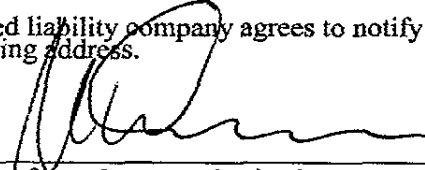
3511 SILVERSIDE RD

(Mailing address)

WILMINGTON, DE 19810-4902

(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)

MICHAEL WINZKOWSKI
(Typed or printed name of signee)

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03 MAY -2 PM 4:53
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Filing Fee: \$25.00