

701000001149

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

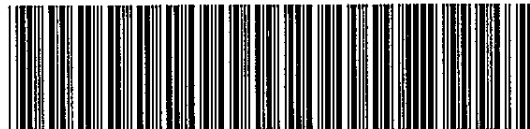
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Name	
Availability	
Document	DCC
Signature	DCC
Office Use Only	
Document	DCC
Document	DCC
W. P. Verifier	DCC



400009947294

01/30/03--01028--023 \*\*25.00

FILED  
03 JAN 30 11:48  
TALLAHASSEE FLORIDA  
STATE  
TALLAHASSEE FLORIDA



" CORPORATION SERVICE COMPANY "

ACCOUNT NO. : 072100000032

REFERENCE : 912470 7137851

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : January 29, 2003

ORDER TIME : 10:12 AM

ORDER NO. : 912470-035

CUSTOMER NO: 7137851

CUSTOMER: Glenda Landon  
Sciencetech Inc.  
440 West Broadway

Idaho Falls, ID 83401

FOREIGN FILINGS

NAME: SCIENTEL, LLC

\_\_\_\_ CORPORATE  
\_\_\_\_ LIMITED PARTNERSHIP  
XX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF STATUS

CONTACT PERSON: Susie Knight - EXT# 1156

EXAMINER: \_\_\_\_\_

FILED  
03 JAN 30 PM 1:48  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

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

SCIENTEL, 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.

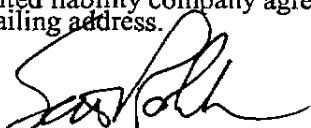
440 WEST BROADWAY

(Mailing address)

IDAHO FALLS, ID 83402

(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)

SCOTT ROBUCK, SECRETARY

(Typed or printed name of signee)

03 JAN 30 PM 1:48  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

FILED

**Filing Fee: \$25.00**