## M010000001950

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)  MOJ - 1950  (Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:  WH

Office Use Only



100068609681

03/24/06--01022--011 \*\*25.00

M. HODBES

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Enterprise Title Insurance Company, 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:
Penny J. Farr (Name of Person)
Morris Manning & Martin, LLP  (Firm/Company)
3343 Peachtree Road, Suite 1600  (Address)
Atlanta, Georgia 30326 (City/State and Zip Code)
For further information concerning this matter, please call:
Penny J. Farr at (404) 504-5468 (Name of Person) (Area Code & Daytime Telephone Number)
(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 \$\ S30 Filing Fee & S55 Filing Fee & S60 Filing Fee, Certificate of Status Certified Copy Certified Copy  Certified Copy  Certified Copy

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

(Name of limited liability company)
(Name of finned hability company)
Georgia
(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.
215 Celebration Place, Suite 200 (Mailing address)
Celebration Florida 34747
(City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any hange in its mailing address.
Henry Y Jaw
Signature of member or authorized representative of a member)
Penny J. Farr
Typed or printed name of signee)

Filing Fee: \$25.00