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(Requestor's Name)	ocoñe JALLAH
(Address)	00009367
(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	
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03 **25.00

Steven E. Smathers

Attorney at Law
1601 Elm Street
Third Floor - Thanksgiving Tower
Dallas, Texas 75201

ssmathers@sowellco.com

FILED 02 DEC 12 AM 9: 53

MONETARY OF STATE TALLAHASSEE, FLORIDA

(214) 871-7227

(214) 871-1620 facsimile

December 6, 2002

Florida Secretary of State Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Sirs:

Attached please find a check in the amount of \$25.00 and an executed withdrawal of Second Life Properties, LLC as a foreign entity doing business in Florida. Please do not hesitate to call the undersigned if there are any problems or comments.

Yours very truly,

. Smathers

SES/pf

Enclosure

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FILED __

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR MITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN PART OF STATE FLORIDA

(Name of limited liability company) Texas (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.	
(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.	and the second
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 grant to accent service on its	
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.	
1601 Elm Street, Suite 300	
(Mailing address)	
Dallas, TX 75201	
(City/State/Zip)	g foto a Garan
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) Steven E. Smathers, Manager	
(Typed or printed name of signee)	

Filing Fee: \$25.00