MUZOOOOS

(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:		
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EXAMINER

MO 3-50C

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Wild Heron Lodge, LLC		
	oreign Limited Liability Company)	
Dear Sir or Madam:		
The enclosed withdrawal and fee(s) are submitted	ted for filing.	
Please return all correspondence concerning this	is matter to the following:	
Holli Parks		
(Name of Person)		
Wild Heron Lodge, LLC		
(Firm/Company)	2008 HAR IT PN 1: 50 SECRETARY OF STATE TALLAHASSEE.FLORID TALLAHASSEE.FLORID	-n
PO Box 230	HAR I	
(Address)	J P	rr
Point Clear, AL 36564	TO TO	-
(City/State and Zip Co	RATE SO	•
For further information concerning this matter,	please call:	
Holli Parks	_{at (} 251) 928-3930	
(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 amoun	t:	
\$25 Filing Fee \$30 Filing Fee & Certificate of Status	\$55 Filing Fee & \$60 Filing Fee. Certified Copy Certificate of Status & Certified Copy	

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

Wild Heron Lodge, 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.
Point Clear, AL 36564 Point Clear, AL 36564 (City/State/Zip) PO Box 230 (Mailing address) ACC ART
The limited liability company agrees to notify the Department of State in the limited of any change in its mailing address.
(Signature of member of authorized representative of a member)
David H. Head Jr.
(Typed or printed name of signee)

Filing Fee: \$25.00