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SECRETARY OF STATE

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## **COVER LETTER**

,		_		
TO: Registration Section Division of Corporations				
SUBJECT: Workforce Innovation				
(Name of F	oreign Limited Liability	Company)		
Dear Sir or Madam:				
The enclosed withdrawal and fee(s) are submit	ted for filing.			
Please return all correspondence concerning th	ris matter to the following	g:		
Angie Henson				
(Name of Person)		-		
Consilient Demonstration				
Snelling Personnel Services (Firm/Company)		-		
(				
12801 N. Central Expwy., St	te. 700		# <b>4</b>	
(Address)		•	2005 SEC ALL	
Dallas, TX 75243			2005 SEP 23 PH 12: 11 SECRETARY OF STATE TALLAHASSEE, FLORIC.	7
(City/State and Zip Co	ode)	•	23 SSE	TIME
	1 11		PH OF S	m
For further information concerning this matter,	please call:		SE S	
Angie Henson	<sub>at (</sub> _972	776-1490	30 I	
(Name of Person)	(Area Code &	Daytime Telephone Number)		
STREET/COURIER ADDRESS:	MAII	ING ADDRESS:		
Registration Section	Registration Section			
Division of Corporations Clifton Building		on of Corporations ox 6327		
2661 Executive Center Circle Tallahassee, Florida 32301		assee, Florida 32314		
Enclosed is a check for the following amount	t <b>:</b>			
\$25 Filing Fee S30 Filing Fee & Certificate of Status	\$55 Filing Fee & Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy		

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

Workforce Innovation XVII, L.L.C.	
(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.	
12801 N. Central Expressway, Suite 700	
(Mailing address)	
Dallas, TX 752473	
(City/State/Zip)	
The limited liability company agrees to notify the Department of State in the future of and charge in its mailing address.  See 23  (Signature of member or authorized representative of a member)	
Barbara A. McAninch	
(Typed or printed name of signee)	

Filing Fee: \$25.00