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(Requestor's Name)
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(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
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Certified Copies Certificates of Status
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SECRETARY OF STATE A

WD 1813

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Kachina Seven, UC (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:	
Burton G Tremaine III (Name of Person)	
(Firm/Company)	
POBOY 3220 (Address) (Address)	
Ven Deach Flood 769-500 Page 300 (City/State and Zip Code)	; 1
For further information concerning this matter, please call:	
Darbara Whanger at (2) 299-5010 (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 □ \$30 Filing Fee & □ \$55 Filing Fee & □ \$60 Filing Fee, Certificate of Status	

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

hachina Seven 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.	
POBOX 3000	
(Mailing address)	
Ven Barch S/32%	-
(City/State/Zip)	T
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.	フ
Burton Grenarii De	
(Signature of member or authorized representative of a member)	
Buton 6 tremaine 111	
(Typed or printed name of signee)	

Filing Fee: \$25.00