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FALLAHASSEF, FI DRIDA

J. SAULSBERRY EXAMINER

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COVER LETTER

то:		ion Section of Corporations				
SUBJE	CT: RE	SPONSE, LLC				
		(Name of For	eign Limited Liability (Company)		
Dear Sir	or Madar	n:				
The enc	losed with	drawal and fee(s) are submitted	d for filing.			
Please ro	eturn all co	orrespondence concerning this	matter to the following	,		
i ioase i	ctarii aii c	orrespondence concerning and	matter to the following	•		
					∑ ⊘:	20
John S	Schaffer					<u></u>
		(Name of Person)			URLIAR (OF SIATE LAHASSEE, FLORIDA	2013 DEC 22
					25.5 25.5 25.5	22
Respo	onse, Ll	_C				T.
		(Firm/Company)		•	FLOS	9
					7 <u>7</u> 2.	9:
1000	AAA Dr	ive ·			D	
		(Address)				
Heath	row, FL		`			
		(City/State and Zip Code	e)			
For furt	her inform	ation concerning this matter, p	lease call:			
1 01 1611	ner miorin	action concerning this matter, p	icase cuit.			
Steph	en Szu	cs	at (407	, 444-7323		
		(Name of Person)		Daytime Telephone Number)		
		COURIER ADDRESS:		ING ADDRESS:		
		ion Section of Corporations		ration Section on of Corporations		
			30x 6327			
		ecutive Center Circle see, Florida 32301	Tallah	assee, Florida 32314		
Enclose	d is a che	ck for the following amount:				
□ \$25 F	Filing Fee	□ \$30 Filing Fee &	\$55 Filing Fee &	□ \$60 Filing Fee,		
	_	Certificate of Status	Certified Copy	Certificate of Status &		

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

RESPONSE, LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
M-02000002130
(Florida Document Number)
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.
1000 AAA Drive
(Mailing address)
Heathrow, FL 32746
(City/State/Zip)
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)
JOHN SCHAFFER
JOHN SCHAFFER (Typed or printed name of signee) 2019 DEC 22 AM 9: 1

Filing Fee: \$25.00