(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
485 671	ļ	



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MO2-2612

Office Use Only

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJE				
	(Name of Fo	oreign Limited Liability (Company)	
Dear S	ir or Madam:			
The en	closed withdrawal and fee(s) are submitt	ed for filing.		
Please	return all correspondence concerning thi	s matter to the following	:	
JOH	N K. MALONEY			E
	(Name of Person)			已
MAL	ONEY & TABOR, INC.			`3 :
	(Firm/Company)			
2510	ANTHEM VILLAGE DRIVE (Address)	, SUITE 100		
HEN	DERSON, NV 89052-5555 (City/State and Zip Co	de)		
For fur	ther information concerning this matter,	please call:		
SAM	UEL G. WEAVER	at (702	387-9397	
	(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		
Enclos	ed is a check for the following amoun	t:		
□\$25	Filing Fee \$\times \$\text{S0 Filing Fee & Certificate of Status}\$	\$55 Filing Fee & Certified Copy	✓ \$60 Filing Fee, Certificate of Status & Certified Copy	



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 12, 2007

JOHN K MALONEY 2510 ANTHEM VILLAGE DRIVE, STE 100 HENDERSON, NV 89052-5555

SUBJECT: INTER HOLDING LLC Ref. Number: M02000002612

We have received your document for INTER HOLDING LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas Regulatory Specialist II

Letter Number: 707A00069666

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

(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 or 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.	07	
2510 ANTHEM VILLAGE DRIVE, SUITE 100 (Mailing address)	OT DEC 17	ALE!
HENDERSON, NV 89052-5555 (City/State/Zip)	AM 8: 0;	
<u> </u>	iu o	

(Signature of member or authorized representative of a member)

JOZE PECECNIK

INTER HOLDING LLC

(Typed or printed name of signee)

Filing Fee: \$25.00

The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.