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(Business Entity Name)

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Wendy M. Pinner, Senior Paralegal
wpinner@tannerguin.com

FILED
04 JAN 20 PM 1:05
Direct Dial: (205) 633-0237
Fax: (205) 633-0337
TALLAHASSEE, FLORIDA

January 12, 2004

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: *MGGreen Cove Springs, LLC*

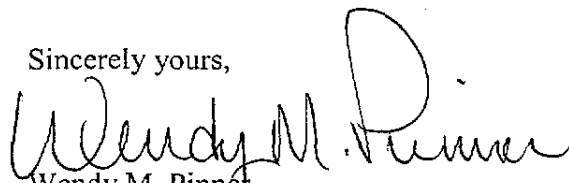
Ladies and Gentlemen:

I am enclosing an *original* and one copy of the Application by Foreign Limited Liability Company for Withdrawal of Authority to Transact Business in Florida for the above-referenced limited liability company, along with a check in the amount of \$25.00 made payable to the Florida Department of State to cover the filing fee for the same.

Please file the original application and return a file-stamped copy to me in the enclosed self-addressed stamped envelope.

If you have any questions or require additional information, please do not hesitate to contact me. Thank you for your assistance.

Sincerely yours,


Wendy M. Pinner
Senior Paralegal

Enclosures

ec: Mr. Robert W. Buchalter (*Via E-mail*)
Mr. Ray G. Dyer, CPA (*Via E-mail*)

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

04 JAN 20 PM 1:05
STATE
FLORIDA

MGreen Cove Springs, LLC

(Name of limited liability company)

Alabama

(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.

1025 15th Street, Suite B4

(Mailing address)

Tuscaloosa, Alabama 35401

(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)

Robert W. Buchalter

(Typed or printed name of signee)

Filing Fee: \$25.00