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(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL.
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B. KOHR

OCT - 8 2010

EXAMINER



Hope C. Lewis
Tax Accountant
Hope.Lewis@DominionEnterprises.com

PO Box 2833 Norfolk, VA 23501-2333 (757) 351-8063

Please return all documents to:

Hope Lewis PO Box 2333 Norfolk, VA 23501-2333

Feel free to contact me if you have any questions or concerns.

Thank you,

Hope C. Lewis

COVER LETTER

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Registration Section Division of Corporations

SUBJECT: DOMINION DISTRIBUTION, L.L.C.

(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:

THOMAS V. ARTHUR,

(Name of Person)

DOMINION ENTERPRISES

(Firm/Company)

PO BOX 2333

(Address)

NORFOLK, VA 23501-2333

(City/State and Zip Code)

For further information concerning this matter, please call:

THOMAS V. ARTHUR, III

(Name of Person)

757 351-8076
(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

\divideontimes 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 & Certificate of Status ☐ \$55 Filing Fee & Certified Copy

□ \$60 Filing Fee, Certificate of Status & Certified Copy

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

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DOMINION DISTRIBUTION, L.L.C. (Name of limited liability company)
(Name of limited liability company)
VIRGINIA
(Jurisdiction of its organization)
M0300000986
(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.
PO BOX 2333
(Mailing address)
NORFOLK, VA 23501-2333
(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)
Guy R. Friddell, III
(Typed or printed name of signee)

Filing Fee: \$25.00