Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: GINN DEVELOPMENT COMPANY, LLC

Account Number : I20080000036

Phone

: (386)246-5859

Fax Number

: (386)246-5856

LLC DISSOLUTION OR WITHDRAWAL GINN SOUTH VILLAGE, LLC

Certificate of Status	0
Certified Copy	0
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T. HAMPTON OCT 2 0 2010

EXAMINER

COVER LETTER

	egistration Section ivision of Corporations
SUBJECT	(Name of Foreign Limited Liability Company)
Dear Sir ot	Madam:
The enclos	ed withdrawal and fee(s) are submitted for filing.
Please retu	rn all correspondence concerning this maner to the following:
10	MMY Hotaling (Name of Person)
	, h

Hammock Beach Pkuy.

And Flool

Palu Coort FL 32137

(City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Person) at (3%) 346-5859

(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:

U 925 Filing Fee

□ \$30 Filing Fee & Certificate of Status

□ \$55 Filing Fee & Certified Copy

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

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

Girin South Vilage, UC	
(Name of limited liability company)	
Seorgia	
(Jurisdiction of its organization)	
M0300000993	
(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.

Hammock Beach Parkway

(Mailing address)

Palm Coast Ft 32137

(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)

(Typed or printed name of signee)

SECRETARY OF STATE ON SOLVISION OF CORPORATIONS

Filing Fee: \$25.00