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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

(850)222-1092

Fax Number

: (850)878-5368

LLC DISSOLUTION OR WITHDRAWAL SERVICEMASTER BSC L.L.C.

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C. LEWIS OCT 1 3 2010 **EXAMINER**

COVER LETTER

| | tion Section of Corporations | | |
|--|---|---------------------------------------|--|
| SUBJECT: Ser | viceMaster BSC L.L.C. | | |
| | (Name of F | oreign Limited Liability | (Company) |
| Dear Sir or Madar | n: | | |
| The enclosed with | drawal and fee(s) are submit | ited for filing, | • |
| Please return all co | orrespondence concerning th | is matter to the followin | . |
| Elaine Gre | (Name of Person) | | _ |
| Service | Master (Firm/Company) | · · · · · · · · · · · · · · · · · · · | - |
| 860 Ride | se Lake Blvd. | | - |
| Memphis | (City/State and Zip Co | de) | - |
| For further informa | tion concerning this matter, | please call; | |
| Elaine Green | _ | at (901 | 597-1291 |
| 1) | Name of Person) | | Daytime Telephone Number) |
| Registratio Division of Clifton But 2661 Exec | f Corporations | Regist Divisio P.O. B | ING ADDRESS: ration Section on of Corporations lox 6327 assee, Florida 32314 |
| Enclosed is a check | for the following amount: | | |
| \$25 Filing Fee | ☐ \$30 Filing Fee & Certificate of Status | 1 \$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

| Scrylcemaster BSC L.L.C. |
|---|
| (Name of limited liability company) |
| Delaware |
| (Jurisdiction of its organization) |
| M03000001031 |
| (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. |
| 860 Ridge Lake Blvd. |
| (Mailing address) |
| Memphis, TN 38120 |
| (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)

Krista A. Endres, Assistant Secretary, ServiceMuster Consumer Services, Inc.

(Typed or printed name of signee)

general partner of ServiceMaster Consumer Services Limited Partnership - Member



Filing Fee: \$25.00