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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: CONECUH BRIDEE & ENGINEERING, LLC. (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:
Teff Polland (Name of Person)
GNEWH BRIDGE & ENGINEERING, INC. FINANCOMPANY)  THE STATE OF THE STATE
Po Box 129 (Address)
Po Box 129  (Address)  TROY  (City/State and Zip Code)
For further information concerning this matter, please call:
Seef Polland at (334) 566 7420 (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
\$25 Filing Fee \$\times \text{\$\text{S55 Filing Fee & Certificate of Status}}\$ Certificate of Status \$\text{Certified Copy}\$\$ Certified Copy
Check is in your offices

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

CONECUH BRIDGE & ENGINEERING LCC
(Name of limited liability company)
Pike County, ALABAMA (Jurisdiction of its organization)
(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.
Po box 129  (Mailing address)
The state of the s
TROY, AL 3608/ 55 32 3 27
(City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
Jet Dues
(Signature of member or authorized representative of a member)
JEFF POLLAND
(Typed or printed name of signee)

Filing Fee: \$25.00