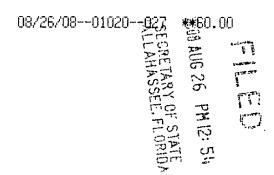
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EXAMINER

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## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: IPQUEST, LLC		
(Name of For	reign Limited Liability Company)	
Dear Sir or Madam:		
The enclosed withdrawal and fee(s) are submitte	ed for filing.	
Please return all correspondence concerning this	matter to the following:	
JP LEMAY		
(Name of Person)		
KITCHENS NEW, LLC		WIR AUG 26 PH 12: 54 SECRETARY OF STATE TALLAHASSEE, FLORIO
(Firm/Company)		15 2 15 2
		388 16
2973 HARDMAN COURT NE		
(Address)		2: E
ATLANTA, GA 30305		ज्ञातां 🗜
(City/State and Zip Cod	le)	
For further information concerning this matter, p	please call:	
JP LEMAY	at ( 404 ) 890-7750	
(Name of Person)	(Arca Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Tallahassee, Florida 32301  Enclosed is a check for the following amount:		
\$25 Filing Fee \$30 Filing Fee \$ Certificate of Status	S55 Filing Fee & Scrifficate of Status & Certified Copy  Certified Copy  Certified Copy	

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

IPQUEST, LLC	
(Name of limited liability company)	
GEORGIA	
(Jurisdiction of its organization)	
This limited liability company is no longer transacting business in Flor authority to transact business in this state.	rida and surrenders its
This limited liability company revokes the authority of its registered ager its behalf and appoints the Department of State as its agent for service cause of action arising during the time it was authorized to transact business	nt to accept service on of process based on a ss in Florida.
2973 HARDMAN COURT NE	
(Mailing address)	·- ·- ·
ATLANTA, GA 30305	
(City/State/Zip)	
The limited liability company agrees to notify the Department of State change in its mailing address.	e in the future of any
(Signature of member or authorized representative of a member)	BOO AUG SECRET
JP LEMAY, PARALEGAL, KITCHENS NEW, LLC	AUG 2
(Typed or printed name of signee)	6 PHIZ: 5

Filing Fee: \$25.00