## M0400000536

| (Re                     | equestor's Name)  |                                       |
|-------------------------|-------------------|---------------------------------------|
| (Ad                     | ldress)           |                                       |
| (Ad                     | dress)            |                                       |
| (Cit                    | ty/State/Zip/Phon | e #)                                  |
| PICK-UP                 | MAIT              | MAIL.                                 |
| (Bu                     | siness Entity Nar | me)                                   |
| . (Do                   | ocument Number)   | · · · · · · · · · · · · · · · · · · · |
| Certified Copies        | _ Certificates    | s of Status                           |
| Special Instructions to | Filing Officer:   |                                       |
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Office Use Only



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**EXAMINER** 



April 22, 2010

BRENDA BACHELOR 10463 HARRIER STREET PLANTATION, FL 33324

SUBJECT: BACHELOR PEMBROKE PINES LLC

Ref. Number: M0400000536

We have received your document for BACHELOR PEMBROKE PINES LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 310A00009970

## **COVER LETTER**

|  | O TER EBITER                          |   |   |           |
|--|---------------------------------------|---|---|-----------|
| TO: Registration Section Division of Corporations          |                                       |   |   |           |
| SUBJECT: Bachelor (Name of Fo                              | embroke<br>oreign Limited Liability ( | Pines LLC Company)  |   |           |
| Dear Sir or Madam:   |                                       |   |   |           |
| The enclosed withdrawal and fee(s) are submit              | ted for filing.                       |   |   |           |
| Please return all correspondence concerning th             | is matter to the following            |   |   |           |
| Brenda Bacher (Name of Person)                             | lor                                   | ·   |   |           |
| (Name of Person)   | ·                                     |   |   |           |
|  |                                       |   |   |           |
| (Firm/Company)   |                                       |   | 2010 HAY -3 MM H: 01 SECRETARY OF STATE TALLAHASSEE, FLORID | ***[1]    |
| 10463 Harrier S<br>(Address)                               | trect                                 |   | SECRETARY OF S  | P. Market |
| (Address)  |                                       |   | 3 R   | ŗT        |
| Plantation, FL 3   | 3324                                  |   | F ST  | Section.  |
| (City/State and Zip Co                                     | ode)                                  |   | RHO.  |           |
| For further information concerning this matter,            | please call:                          |   |   |           |
| Brenda Bachelor (Name of Person)                           | at (_954)                             | 424-1503  |   |           |
| (Name of Person)   | (Area Code &                          | Daytime Telephone Number)                                       |   |           |
| STREET/COURIER ADDRESS: Registration Section               |                                       |   |   |           |
| Division of Corporations Clifton Building                  |                                       | n of Corporations   |   |           |
| 2661 Executive Center Circle<br>Tallahassee, Florida 32301 |                                       | ssee, Florida 32314   |   |           |
| Enclosed is a check for the following amoun                | t: Prepaid                            |   |   |           |
| □ \$25 Filing Fee  | S55 Filing Fee & Certified Copy       | □ \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |   |           |

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

| Bachelon Pembroke Pines LLC  |
|--|
| (Manie of minied hability company)   |
| Wera da (Jurisdiction of its organization)   |
| (Jurisdiction of its organization)   |
| M04000000536   |
| (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 an its behalf and appoints the Department of State as its agent for service of process based of a cause of action arising during the time it was authorized to transact business in Florida — |
|  |
| (Mailing address)  |
| (Mailing address)  Plantation, FL 33324  (City/State/Zip)  |
| (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)   |
| (Signature of member or authorized representative of a member)   |
| Brenda Bachelor (Typed or printed name of signee)  |
| (Typed or printed name of signee)  |

Filing Fee: \$25.00