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SECRETARY OF STATE
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## **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJE	CCT: HJR Developers LLC (Name of Foreign Limited	d Liability Company)	
Dear Si	ir or Madam:		
The en	closed withdrawal and fee(s) are submitted for filing.		
Please	return all correspondence concerning this matter to th	e following:	
	J. David Harris (Name of Person)	<del></del>	
	HJR Developers LLC	<u> </u>	
	(Firm/Company)	TALI TALI	2
	Post Office Box 9399	CRETA LAHAS	<b>₽</b>
	(Address)	SEE.	<b>)</b>
<del>.,,,</del>	Panama City Beach, FL 32417 (City/State and Zip Code)	FLORIDA FLORIDA	j
For fur	ther information concerning this matter, please call:	<b>-</b> 01	
	J. David Harris at ( (A	850 ) 234-7252 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	
Enclos	ed is a check for the following amount:		
\$25	Filing Fee \$\Bigcup \$\sum \text{\$\sum \text{\$\sin \text{\$\sum \text{\$\sin \text{\$\sum \text{\$\sum \text{\$\sum \text{\$\sin \sin \text{\$\sin \text{\$\sin \text{\$\sin \text{\$\sin \text{\$\sin \sin \sin \text{\$\sin \text{\$\sin \text{\$\sin \text{\$\sin \text{\$	ing Fee & \$\infty\$	

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

HJR Developers LLC
(Name of limited liability company)
State of Alabama Shelby County (Jurisdiction of its organization)
(variation 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 Flinda.
Post Office Box 9399
(Mailing address)
Panama City Beach, FL 32417
(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)
(1) ped or printed name of signey

Filing Fee: \$25.00