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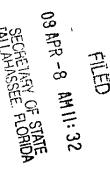
(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: WPA - N2, IJC (Name of Fore	eign Limited Liability Company)	_
Dear Sir or Madam:		
The enclosed withdrawal and fee(s) are submitted	i for filing.	
Please return all correspondence concerning this	matter to the following:	
Carol Ann Bowman		
(Name of Person)		
Whiteco Industries, Inc.		OB AP
(Firm/Company)		題。
1000 East 80th Place, Suit	te 700 North	08 APR -8 AM 11:35
(Address)		STA
Merrillville, Indiana 4641	.0	Öm r
(City/State and Zip Code	e)	
For further information concerning this matter, p	lease call:	
Carol Ann Bowman	at (219) 757-3511	
(Name of Person)	(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	
Enclosed is a check for the following amount:		
\$25 Filing Fee \$\frac{1}{3}\$30 Filing Fee \$\frac{1}{2}\$Certificate of Status	\$55 Filing Fee & \$60 Filing Fee, Certified Copy Certificate of Status & Certified Copy	

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

(Name of limited liability company)
(Name of finited facility company)
Indiana
(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. 1000 East 80th Place, Suite 700 North
1000 East 80th Place, Suite 700 North (Mailing address)
Merrillville, Indiana 46410 (City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
WPA Development, LLC, Manager
(Signature of member or authorized representative of a member)
John M. Peterman, Manager (Typed or printed name of signee)

Filing Fee: \$25.00