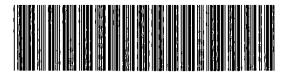
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(Re	equestor's Name)			
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COVER LETTER

1,

TO:

TO:			on Section f Corporations			
SUBJI	ECT:	Allia	nce Consulting Group	o, LLC		· ·····
			(Name of Fo	oreign Limited Liability C	Company)	
Dear S	ir or N	1adam	:			
The en	closed	withd	rawal and fee(s) are submitt	ted for filing.		
Please	return	all co	rrespondence concerning thi	is matter to the following:	:	
Donn	a Err	zior				72
	<u> </u>	42ICI	(Name of Person)			12 JUN
						Ç
			(Firm/Company)			
1700) Par	k Rid	lge Pointe			
			(Address)			
Park	Ridg	je, IL	. 60068			
			(City/State and Zip Co	de) · ·		
For fur	ther ir	ıforma	tion concerning this matter,	please call:		
Donr	na Fr	azier		at (847	682-1237	· · · · · · · · · · · · · · · · · · ·
		()	Name of Person)	(Area Code &	Daytime Telephone Number)	
			COURIER ADDRESS:		ING ADDRESS:	
Registration Section Division of Corporations		Registration Section Division of Corporations				
Clifton Building		P.O. Box 6327				
			eutive Center Circle e, Florida 32301	Tallaha	assee, Florida 32314	
Enclos	ed is a	chec	k for the following amount	t:		
፟ \$25	Filing	Fee	■ \$30 Filing Fee & Certificate of Status	\$55 Filing Fee & Certified Copy	■ \$60 Filing Fee, Certificate of Status & Certified Copy	

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

Alliance Consulting Group, LLC
(Name of limited liability company)
Alliance Consulting Group, LLC (Name of limited liability company) Illinois (Jurisdiction of its organization) M04000003436
(Jurisdiction of its organization)
M04000003436
(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 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.
1700 Park Ridge Pointe (Mailing address)
Park Ridge, IL 60068
(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)
Donna L. Frazier
(Typed or printed name of signee)

Filing Fee: \$25.00