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(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #)	l
-	-	
☐ PICK-UP	WAIT	MAIL
(Bu	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
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L <u>.</u>		

Office Use Only



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A. Sittles MAY 2 1 2014

COVER LETTER

TO:

Registration Section

Division of	Corporations		
SLBS	, LLC		
SUBJECT:	(Name of For	eign Limited Liability C	ompany)
Dear Sir or Madam:			
The enclosed withdra	wal and fee(s) are submitted	l for filing.	
Please return all corre	espondence concerning this	matter to the following:	
Tosha Hodges	·		
	(Name of Person)		
SLBS, LLC			
	(Firm/Company)		
1024 Executive	Park Ave.		
	(Address)		
Baton Rouge, L	A 70806		
	(City/State and Zip Cod	e)	
For further informati	on concerning this matter, p	lease call:	
Tosha Hodges		225 at (303-9117
(N	ame of Person)		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		ration Section on of Corporations ox 6327	
Enclosed is a check	for the following amount:		
☑ \$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

SLBS, LLC	
	(Name of limited liability company)
Louisiana	
	(Jurisdiction of its organization)
8/27/2004	
	(Date registered with Florida Department of State)
M04000003592	
	(Florida Document Number)
This limited liability	company is withdrawing its certificate of authority in this state.
	Culte
	(Signature of authorized representative)
Rick	Jackson V
	(Typed or printed name of signee)
	FLORID ORD

Filing Fee: \$25.00