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T. HAMPTON

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**EXAMINER** 

## **COVER LETTER**

TO:	Registration Section Division of Corporations			
SUBJE	CT: EXCELSIOR IMPORTS, L	LC		
	(Name of Fo	oreign Limited Liability	Company)	
Dear Si	r or Madam:			
The enc	losed withdrawal and fee(s) are submit	ted for filing.	· · · · · · · · · · · · · · · · · · ·	
Please r	eturn all correspondence concerning th	is matter to the following	ng:	
	·			
Jame	s A Tramonte Jr		, · ·	
	(Name of Person)		_	
Excel	sior Imports LLC			
	(Firm/Company)		_	
2870	Peachtree Rd, #407		_	
	(Address)		_	
Atlant	ta, GA 30305		•	
	(City/State and Zip Co	ode)	<del>-</del>	
For furt	her information concerning this matter,	please call:		
Jame	s A Tramonte Jr	at ( 404	966-7369	
	(Name of Person)		& Daytime Telephone Number)	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Regi Divi: P.O.	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclose	ed is a check for the following amoun	t:		
ア\$25 I ・	Filing Fee \$\ \tag{S30 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

**EXCELSIOR IMPORTS LLC** 

(Name of limited liability company)
ATLANTA, GEORGIA
(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.
2870 PEACHTREE RD, #407 (Mailing address)
ATLANTA, GA 30305 (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)
James A Tramonte Jr.
(Typed or printed name of signee)

8 28 PM 12:

SION OF CORPORATION

Filing Fee: \$25.00