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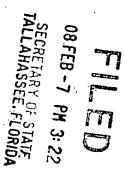
(F	Requestor's Name)
(A	Address)
(A	Address)
(C	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
(Document Number)	
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:

Office Use Only



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02/07/08--01031--017 **25.00



D. BRUCE

FEB 07 2008

EXAMINER

COVER LETTER

Division of Corporations			
SUBJECT: FANTASTIC FREIGHT ST	ERVICE LLC		
Dear Sir or Madam:			
The enclosed withdrawal and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the follo	wing:		
Mike PENO (Name of Person)			
FANTASTIC FREIGHT SETVICE		08 SEI TALL	
1321 TERRACE ROAD (Address)		B FEB -7 EGRETARY LAHASSEI	T
Clearwater 7L 33755 (City/State and Zip Code)		PM 3: 22 Of STATE Of FLORID	
For further information concerning this matter, please call:	d'a		
Mike PENO at (727) (Name of Person) (Area Co	de & Daytime Telephone Number)		
Registration Section R Division of Corporations D Clifton Building P	IAILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314		
Enclosed is a check for the following amount:			
\$25 Filing Fee \$30 Filing Fee & \$55 Filing Fee Certificate of Status Certified Cop			

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

FANTASTIC FREIGHT SERVICE LLC (Name of imited liability company)
(Name of limited liability company)
DE A WARE (Jurisdiction of its organization)
(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 ts 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.
1321 TERRACE ROAD (Mailing address)
Clearwater 71. 33755
The limited liability company agrees to notify the Department of State in the future of any change in its marting address.
change in its malling address.
Signature of member of authorized representative of a member)
Michael J. PENO
(Typed or printed name of signee)
HAX.
SSE -7
TO THE PERSON OF
PM 3: 22 OF STAIL FLORID
5 7 N

Filing Fee: \$25.00