

MD500000-1613

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

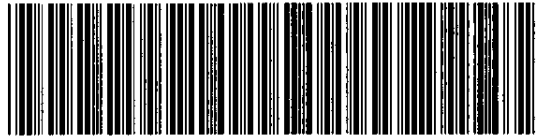
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. O. O'Connell APR 26 2010



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April 19, 2010

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**RE: Landstar Coney, LLC
Boggy Creek Coney, LLC
Withdrawal of Authority**

Dear Secretary,

Enclosed herein please find the original Application by Foreign Limited Liability Company for Withdrawal of Authority to Transact Business in Florida for Landstar Coney, LLC and Boggy Creek Coney, LLC. We also enclose herein check in the amount of \$50.00 to cover the filing fees. Please file the same and return the filed evidence to the undersigned in the enclosed envelope.

Should you have any questions with respect to the enclosed, please do not hesitate to contact me.

Very truly yours,

A handwritten signature in cursive script that reads "Geneva Reimer".

Geneva Reimer
Paralegal to Lawrence A. Swain

GR:

Enclosures

cc: Ms. Jami Phillips
Lawrence A. Swain, Esq.

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

Boggy Creek Coney, LLC

(Name of limited liability company)

Kansas

(Jurisdiction of its organization)

M05000001613

(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.

10955 Granada

(Mailing address)

Overland Park, KS 66211

(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)

Robert S. Cutler, Manager

(Typed or printed name of signee)

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00