M05000001968

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
_	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 16, 2013

C. DELBERT HOSEMANN, JR. LOT 9 OAK GROVE, LLC 2219 HERITAGE HILL DRIVE JACKSON, MS 39211

SUBJECT: LOT 9 OAK GROVE, LLC

Ref. Number: M05000001968

We have received your document for LOT 9 OAK GROVE, LLC and Rour check(s) totaling \$25.00. However, the enclosed document has not been and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 913A00019686

COVER LETTER

	•			
TO: Registration Section Division of Corporations				
SUBJECT: Lot 9 Gak Gran (Name of For	eign Limited Liability	Company)		
Dear Sir or Madam:				
The enclosed withdrawal and fee(s) are submitted	d for filing.			
Please return all correspondence concerning this	matter to the following	: .		
C. Delbert Hosemann, (Name of Person)	Je.			
Lot 9 Oak Grove, (Firm/Company)	LC			
2219 Heritage Hill Dr.	· · · · · · · · · · · · · · · · · · ·		SECKETA FALLAHA	
JA-ckscn, US 39: (City/State and Zip Code) V		JG 26 AM JI: 02 TARY OF STATE HASSEE FLORIDA	į
For further information concerning this matter, pl	teasc call:		8 A	•
Mona Enstern	at (601	359-6342		
(Name of Person)	(Area Code &	Daytime Telephone Number)		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Regist Divisio P.O. B	ration Section on of Corporations fox 6327 assee, Florida 32314	•	
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		

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

Name of limited liability company)	_
Folioa (Jurisdiction of its organization)	_
M 6 50000 D 1968 (Florida Document Number)	<u>-</u>
This limited liability company is no longer transacting business in Florida and surrenders it authority to transact business in this state.	s
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.	3
2219 Heritage Hill Dr. (Mailing address)	
JAEKSON, MS 3921/ (City/State/Zip)	!
The limited liability company agrees to notify the Department of State in the future of any charge in its mailing address.	
(Signature of member or authorized representative of a member)	m
C. Delbert Hexamum Te	

(Typed or printed name of signee)