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D. BRUCE

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: P.J. STRA LIBERGER + (v. L.L.C.  (Name of Foreign Limited Liability Company)
Dear Sir or Madam:
The enclosed withdrawal and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
PETER J. STAJNEFREER (Name of Person)
(Firm/Company)  FW AM AN / AMP
Palm Coast F-L-20164  Palm Coast F-L-20164
(City/State and Zip Code)  For further information concerning this matter, please call:
(Name of Person) at (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building P.O. Box 6327 Clifton Executive Center Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
\$25 Filing Fee \$30 Filing Fee & \$55 Filing Fee & \$60 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy

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

PT HONORAFORER + 6 1110
P.J. STRAINBERGER + 6. L.L.C. (Name of limited liability company)
Delawaze (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.
7 EMPRICATE (Mailing address)
Palm Coast FL. J2164 (City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
Colonia Coloni
TETER J. IT MILLIER GER
(Typed or printed name of signee)
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Filing Fee: \$25.00