## M05000005198

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MAY 1 : 2011

EXAMINER

04/25/2011 14:42 2142348201

**COVER LETTER** 

TO: Registration Section Division of Corporations	
SUBJECT: Rainier (Name of Fo	Oreign Limited Liability Company)
Dear Sir or Madam:	
The enclosed withdrawal and fee(s) are submitt	ed for filing.
Please return all correspondence concerning this	is matter to the following:
NEIL BOYD (Name of Person)	•
(Name of Person)	· · · · · · · · · · · · · · · · · · ·
(Firm/Company)	
118 CENTRAL	DR.
, ,	
FOREST CITY (City/State and Zip Co	1A. 50436-2005.
For further information concerning this matter,	please call:
Neil Boyd (Name of Person)	at (641) 585 2329 (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301  Enclosed is a check for the following amount	t <del>:</del>
\$25 Filing Fee & Certificate of Status	Certified Copy  Certified Copy  Certificate of Status & Certified Copy

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

Rainier SDP 8 LLC (Name of limited liability company)	
(Name of limited liability company)	
Delawaie	
(Jurisdiction of its organization)	
M 05 000005198	
(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.	
Mailing address)	
Jorest City, Ja. 50436-	7005
The limited liability company agrees to notify the Department of State in the future of any change in its making address.	
Musta	
(Signature of member of authorized representative of a member)	
NEIL C. BOYD	
(Typed or printed name of signee)	رم.

Filing Fee: \$25.00