

M05000006212

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

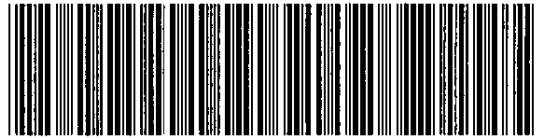
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300156457623

06/02/09--01056--002 **25.00

FILED

2009 JUN -2 AM 10:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

JUN -3 2009

EXAMINER

M05-6212

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Festiva Resorts, LLC
(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:

Miriam Day, Legal Dept. Manager

(Name of Person)

Festiva Resorts, LLC

(Firm/Company)

One Vance Gap Road

(Address)

Asheville, NC 28805

(City/State and Zip Code)

For further information concerning this matter, please call:

Miriam Day, Legal Dept. Manager at (828) 254-3378, ext. 4312
(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

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 & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

FILED
2009 JUN -2 AM 10:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Festiva Resorts, LLC

(Name of limited liability company)

Nevada

(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.

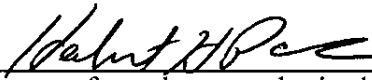
One Vance Gap Road

(Mailing address)

Asheville, NC 28805

(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)
Festiva Development Group, LLC, Sole Member
Herbert H. Patrick, Jr., President

(Typed or printed name of signee)

2009 JUN -2 AM 10:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Filing Fee: \$25.00