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M0500000C798	
(Requestor's Name) (Address) (Address)	700187193137
(City/State/Zip/Phone #)	10/29/1001036012 **55.00
(Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	TRECEIVED DEFARIMENT OF STATE 2010 OCT 29 PM 2: 55 30 FOR ADVISION SUFFICIENCY OF FILING
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CORPDIZECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 e) 222-1173

FILING COVER SHEET ACCT. #FCA-14

- **CONTACT:** KATIE WONSCH
- DATE: 10/29/2010
- **REF. #:** 000447.135110
- CORP. NAME: AFO HOLDINGS, LLC
- () ARTICLES OF INCORPORATION () ARTICLES OF AMENDMENT

() FOREIGN QUALIFICATION

() ANNUAL REPORT

() REINSTATEMENT

Examiner's Initials

- () TRADEMARK/SERVICE MARK
- () LIMITED PARTNERSHIP
- () MERGER

() FICTITIOUS NAME () LIMITED LIABILITY

() ARTICLES OF DISSOLUTION

(XX) WITHDRAWAL

- () CERTIFICATE OF CANCELLATION
- () OTHER:

STATE FEES PREPAID WITH CHECK# 537208 FOR \$ 55.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

COST LIMIT: \$_____ **PLEASE RETURN:** () CERTIFICATE OF GOOD STANDING () PLAIN STAMPED COPY (XX) CERTIFIED COPY () CERTIFICATE OF STATUS





APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR 10 0C1 29 PM 3: 28 WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

AFO Holdings, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

M0500006798

(Florida Document Number)

This limited liability company is no longer transacting business in Florida and surronders 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.

% Perkins Cole LLP, 101 Jefferson Drive (Mailing address)

Menio Park, CA 92025

(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)

Amir Glogau, Manager

(Typed or printed name of signee)

Filing Fee: \$25.00