

MO6000000333

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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MAIL

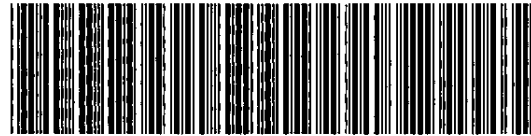
(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 OCT - 1 AM 11:07

T. HAMPTON

OCT - 4 2010

EXAMINEP

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: _____ INFINITY BUILDERS OF THE EMERALD COAST, 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:

_____ W. STEVE BOZEMAN, JR.
(Name of Person)

INFINITY BUILDERS OF THE EMERALD COAST, LLC
(Firm/Company)

_____ 5480 CHAMPIONS DRIVE
(Address)

_____ PACE, FL 32571

(City/State and Zip Code) For

further information concerning this matter, please call:

W. STEVE BOZEMAN, JR. . at (_____) .
(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:

Q \$25 Filing Fee

Q \$30 Filing Fee & Q \$55 Filing Fee &
Certificate of Status Certified Copy

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

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

INFINITY BUILDERS OF THE EMERALD COST, LLC

(Name of limited liability company)

MISSISSIPPI (Jurisdiction
of its organization)

M06000000333

(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.

5480 CHAMPIONS DRIVE

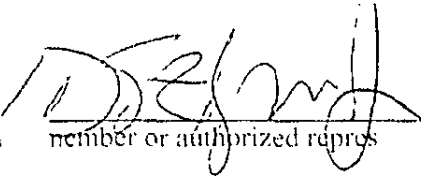
(Mailing address)

PACE FL 32571

(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 &


member or authorized representative

W. STEVE BOZEMAN, JR.

(Typed or printed name of signee)

Filing Fee: \$25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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