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EXAMINER

1106-162

COVER LETTER

Division of Corporations			
SUBJECT: Cuellar USA, LLC			
	ign Limited Liability C	ompany)	
Dear Sir or Madam:			
The enclosed withdrawal and fee(s) are submitted	for filing.		
Please return all correspondence concerning this r	matter to the following:		
Maria Bretones			∾e[°,
(Name of Person)			
Cosentino North America			がい
(Firm/Company)			men men
8665 Hudson Blvd, Suite 100B			
(Address)			<i>1</i> ,22
Lake Elmo, MN 55042			
(City/State and Zip Code)		
For further information concerning this matter, plants	ease call:		
Maria Bretones	at (651)	783-5704	
(Name of Person)		Daytime Telephone Number)	
STREET/COURIER ADDRESS:	MAILI	ING ADDRESS:	
Registration Section	Registration Section		
Division of Corporations	Division of Corporations P.O. Box 6327		
Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314		
Enclosed is a check for the following amount:			
\$25 Filing Fee \$\ Certificate of Status	\$55 Filing Fee & Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy	

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

Cuellar USA, LLC		
(Name of limited liability company)		
Minnesota		
(Jurisdiction of its organization)		
This limited liability company is no longer transacting business in Florida and authority to transact business in this state.	surrende	ers its
This limited liability company revokes the authority of its registered agent to access its behalf and appoints the Department of State as its agent for service of process cause of action arising during the time it was authorized to transact business in Floritance.	ept servi ss based ida.	ce on on a
8665 Hudson Blvd., Suite 100B	EG Eg	CNID CNID CNID
(Mailing address) Lake Elmo, MN 55042	ASSE	
(City/State/Zip)		
The limited liability company agrees to notify the Department of State in the change in its mailing address.	future o	f any
T.		
(Signature of member or authorized representative of a member)		
Timothy Walsh, Secretary		
(Typed or printed name of signee)		

Filing Fee: \$25.00