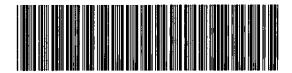
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SÉCREJARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: TRINITY VIP TEAVEL 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:				
Tonia	(Name of Person)			
Trinit	Y VIP TRAY (Firm/Company)	vel, LLC		
8305	Dakfield C	ourt		
Biloxi, MS 39532 (City/State and Zip Code)				
For further information concerning this matter, please call:				
Tonia Jones at (228) 236-4900				
(Na	ame of Person)	(Area Code &	Daytime Telephone Number)	
STREET/C Registration	OURIER ADDRESS: Section		ING ADDRESS:	
Division of Corporations Clifton Building		Divisio	Division of Corporations P.O. Box 6327	
2661 Execu	tive Center Circle , Florida 32301		assee, Florida 32314	
Enclosed is a check for the following amount:				
<b>♯</b> \$25 Filing Fee	S30 Filing Fee &	□ \$55 Filing Fee &	■ \$60 Filing Fee,	
-	Certificate of Status	Certified Conv	Certificate of Status &	

Certified Copy

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

TRINITY VIP TRAVEL LLC (Name of limited liability company)
MISSISSI DI
M 06 0000 29 10 (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.
8305 Oakfeld Court (Mailing address)
Biloxi MS 39532 (City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
Jonin Jones
(Signature of member or authorized representative of a member)
(Typed or printed name of signee)

Filing Fee: \$25.00