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•
(Requestor's Name)
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,
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PICK-UP WAIT MAIL
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(Document Number)
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SECRETARY OF STATE
AND AHASSEE, FLORID

FILED

COVER LETTER

TO: Registration Division of	n Section Corporations			
· SUBJECT: Key V	Vest GSA, LLC		•	٠
•	(Name of Fo	reign Limited Liability	Company)	
Dear Sir or Madam:				
The enclosed withdr	awal and fee(s) are submitt	ed for filing.		
Please return all corr	respondence concerning thi	s matter to the followir	g: ·	
James K. Kuy	k			
	(Name of Person)		-	
Grant & Kuyk,	a Professional Corp (Firm/Company)	oration	_	ZION OC SECRITALLA
471 Church St	treet, Suite 260			SECRETARY OF STATE
	(Address)			E.F.
Charleston, S0	C 29401			2: 3 ORI
	(City/State and Zip Co	de)	-	DM F
For further informati	ion concerning this matter,	please call:		
Jim Kuyk		at (843	, 723-5200	
(N	ame of Person)		& Daytime Telephone Number)	
Registration SectionRegistDivision of CorporationsDivisionClifton BuildingP.O. B		LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, 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	

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

Key West GSA, LLC

South Carolina (Jurisdiction of its organization)	
	
This limited liability company is no longer transacting business in Florida and surrauthority to transact business in this state.	enders its
This limited liability company revokes the authority of its registered agent to accept s its behalf and appoints the Department of State as its agent for service of process because of action arising during the time it was authorized to transact business in Florida.	service on ased on a
2 Wharfside Street, Suite 20	
(Mailing address)	⊼ ′′ ≥
Charleston, SC 29401	SECRETAF
(City/State/Zip)	TAR IASS
The limited liability company agrees to notify the Department of State in the future than the future that the	PH 2:
	製品が
(Signature of member or authorized representative of a member)	
John E. McGrath, Manager	
(Typed or printed name of signee)	

Filing Fee: \$25.00

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