

MO6000004392

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

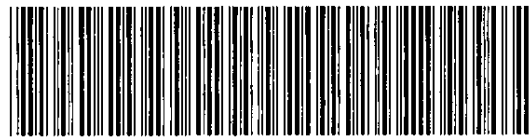
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 OCT -4 PM 3:25

B. KOHR

OCT - 8 2010

EXAMINER



Hope C. Lewis  
Tax Accountant  
Hope.Lewis@DominionEnterprises.com

PO Box 2333  
Norfolk, VA 23501-2333  
(757) 351-8063

September 23, 2010

Please return all documents to:

**Hope Lewis**  
**PO Box 2333**  
**Norfolk, VA 23501-2333**

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Feel free to contact me if you have any questions or concerns.

Thank you,

Hope C. Lewis

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** INTERCO PRINT, 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:

THOMAS V. ARTHUR, III  
(Name of Person)

DOMINION ENTERPRISES  
(Firm/Company)

PO BOX 2333  
(Address)

NORFOLK, VA 23501-2333  
(City/State and Zip Code)

For further information concerning this matter, please call:

THOMAS V. ARTHUR, III at (757) 351-8076  
(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:

- ☒ \$25 Filing Fee      ☐ \$30 Filing Fee & Certificate of Status      ☐ \$55 Filing Fee & Certified Copy      ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

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DIVISION OF CORPORATIONS  
10 OCT - 4 PM '25

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

INTERCO PRINT, LLC

(Name of limited liability company)

DELAWARE

(Jurisdiction of its organization)

M06000004392

(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.

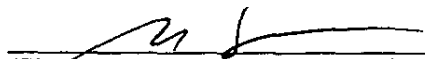
PO BOX 2333

(Mailing address)

NORFOLK, VA 23501-2333

(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)

Guy R. Friddell, III

(Typed or printed name of signee)

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**Filing Fee: \$25.00**