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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 Phone

: (850)222-1092 Fax Number : (850)878-5368

LLC DISSOLUTION OR WITHDRAWAL RILEY FIELD TIMBER COMPANY LLC

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## **COVER LETTER**

TO: Registration Section Division of Corporations FIELD TIMBER COMPANY (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: CONSERVATION NH EXETER

For further information concerning this matter, please call:

(City/State and Zip Code)

STREET/COURIER ADDRESS: Registration Section

Division of Corporations Clifton Building 2661 Executive Center Circle Tullahassee, 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 Pee & Certified Copy

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

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

RILEY FIELD TIMBER COMPANY, LLC			
(Name of limited liability company)			
DELAWARE			
(Jurisdiction of its organization)			
FEIN#76-0835803 - DOC# M06000004789			
(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.			
P.O. BOX 570 (Mailing address)			
(Mailing address)			
EXETER, NH 03833			
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.			
Frederick W. Blum			
(Signature of member or authorized representative of a member)			
FREDERICK W. BLUM			
(Typed or printed name of signec)			

Filing Fee: \$25.00