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FILED 2001 MAY TO A 11: 45 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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**Registration Section** TO: **Division of Corporations** 

## SUBJECT: Bluestone Acquisitions, LLC

(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

1.

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Casey P. Walsh

(Name of Person)

Time Value Property Exchange, Inc.

(Firm/Company)

9 Damonmill Square, Suite 1A

1. f.

(Address)

Concord MA 01742 • 545 5 4 F + -

> (City/State and Zip Code) ۰.

For further information concerning this matter, please call:

Casey P Walsh

(Name of Person)

at (<u>978</u>)<u>610-1153</u> (Area Code & Daytime Telephone Number)

**MAILING ADDRESS:** 

**Division of Corporations** 

**Registration Section** 

STREET/COURIER ADDRESS: **Registration Section Division of Corporations Clifton Building** 2661 Executive Center Circle Tallahassee, Florida 32301

## P.O. Box 6327 Tallahassee, Florida 32314

Enclosed is a check for the following amount:

**✓** \$25 Filing Fee

\$30 Filing Fee & \$55 Filing Fee & Certified Copy Certificate of Status

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

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

**Bluestone Acquisitions, LLC** 

(Name of limited liability company)

Delaware

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(Jurisdiction of its organization)

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.

9 Damonmill Square, Suite 1A	
(Mailing address)	
Concord MA 01742	2001 TALL
(City/State/Zip)	State in the Eture of any
The limited liability company agrees to notify the Department of S change in its mailing address.	
(Signature of member or authorized representative of a member) PRESIDENT OF TVPX ACQUISITIONS, INC	D STATE LORIDA
Tobias Kleitman MANAGING MEMBER	
(Typed or printed name of signee)	

Filing Fee: \$25.00