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TALLAHASSEE. FLORID

T. CLINE

MAR - 4 2008

EXAMINER

WO 501

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: W-S Mechanical Group	, LLC			
(Name of Fo	oreign Limited Liabil	ity Company)	,	
Dear Sir or Madam:				
The enclosed withdrawal and fee(s) are submit	ted for filing.			
Please return all correspondence concerning th	is matter to the follow	ving:		
Cheryl Benavidez				
(Name of Person)				
W-S Mechanical Group, LLC (Firm/Company)		<u>-</u>		
(Time company)				
13667 192nd Street			7.0	
(Address)			2008 MAR SEGRETA TALLAHA	ar market in St.
Council Bluffs, IA 51503			AR - ETAI HAS	Come
(City/State and Zip Co	ode)		SE SE	, 13
			TOS I	egne utili Skriget
For further information concerning this matter,	please call:		PH 1: 20 OF STATE E. FLORID))
Cheryl Benavidez	at (_712	366-8886		
(Name of Person)	(Area Cod	le & Daytime Telephone Nun	nber)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Div P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 Ilahassee, Florida 32314		
Enclosed is a check for the following amount	t:			
\$30 Filing Fee & Certificate of Status	\$55 Filing Fee Certified Copy	& \$\bigcip\\$60 Filing Fee, Certificate of Stat Certified Copy :		m y .

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

W-S Mechanical Group, LLC
(Name of limited liability company)
Nebraska
(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.
13667 192nd Street (Mailing address)
Council Bluffs, IA 51503 City/State/Zip) Council Bluffs, IA 51503
(City/State/Zip)
SON CONTRACTOR OF THE PROPERTY
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
Tranklin P. Lan
(Signature of member or authorized representative of a member)
Franklin P Lynn
(Typed or printed name of signee)

Filing Fee: \$25.00