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J. SAULSBERRY **EXAMINER** 

MAR 21 2012

## **COVER LETTER**

TO: Registration Division o	on Section f Corporations				
SUBJECT: Peri	ormance Food Group (Name of Fo	of Georgia, LLC reign Limited Liability	Company)	<u></u>	
Dear Sir or Madam	:				
The enclosed withd	rawal and fee(s) are submitt	ed for filing.			
Please return all con	respondence concerning thi	s matter to the following	3:		
Michelle M. Be	nton			.a	
	(Name of Person)		•	FALLI	2012 F
Performance F	ood Group, Inc.			RETARY OF	2012 MAR 19
	(Firm/Company)		•	Y OF S	3
12500 West C	reek Parkway			LORID	納 8:12
	(Address)			~	, ~
Richmond, VA	23238				
	(City/State and Zip Coo	le)			
For further informat	ion concerning this matter, p	please call:			
Michelle Bento	n	at (804	287-8097		
(N	ame of Person)		Daytime Telephone Number)		
Registration Division of Clifton Bui 2661 Execu Tallahassee	Corporations Iding tive Center Circle , Florida 32301	Registr Divisio P.O. Bo Tallaha	ING ADDRESS: ration Section on of Corporations ox 6327 assee, Florida 32314		
	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

 $\S$ 

Performance Food Group of Georgia, LLC	
(Name of limited liability company)	
Delaware	
(Jurisdiction of its organization)	
M0700000552	
(Florida Document Number)	
This limited liability company is no longer transacting business in Floric authority to transact business in this state.	la and surrenders its
This limited liability company revokes the authority of its registered agent its behalf and appoints the Department of State as its agent for service of cause of action arising during the time it was authorized to transact business	to accept service on f process based on a in Florida.
12500 West Creek Parkway	
(Mailing address)	
Richmond, VA 23238	
(City/State/Zip)	
The limited liability company agrees to notify the Department of State change in its mailing address.	in the future of any
mimh	72
(Signature of member or authorized representative of a member)	OIZI
Michael L. Miller	ELLAHASS
(Typed or printed name of signee)	H 19 ARY SSE
	TO REITH
	M & I
	<u> </u>

Filing Fee: \$25.00