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Dear Sir or Madam:		·			
The enclosed withdrawa	l and fee(s) are submitted	for filing.	,		
Please return all correspondent	ondence concerning this	matter to the followin	g:		
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(Name	of Person)	at (GOY)) 335 & Daytime Tele	733	3
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

(Name of limited liability company)	
Delaware (Jurisdiction of its organization)	
(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.	
Mailing address)	•
FERNANDING BLACK FL 32035	
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) Ann Maria Wislamm (Typed or printed name of signee)	7
77.5 At.	

Filing Fee: \$25.00