1107000003509

-	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UF	P WAIT MAIL	
- :	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		
i		

Office Use Only



800128518978

05/08/08--01027--009 **25.00

SECRETARY OF STATE DIVISION OF CORPORATIONS

08 MAY 30 PM 4: 09



J. BRYAN

JUN - 3 2008

EXAMINER

2024-34621



May 9, 2008

HARLAN ALLEN JR ALLEN CAPITAL LLC 4565 NAUTICAL CT DESTIN, FL 32541-5320

SUBJECT: ALLEN CAPITAL, L.L.C.

Ref. Number: M07000003509

We have received your document for ALLEN CAPITAL, L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Letter Number: 308A00029803

Joey Bryan Regulatory Specialist II OR MAY 30 PH 4: 09

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJE		reign Limited Liability Cor	
Dear Sir	or Madam:		,
The encl	osed withdrawal and fee(s) are submitte	ed for filing.	
Please re	eturn all correspondence concerning this	matter to the following:	
HA	mean Allen		
	(Name of Person)		
AC	LENCAPITAL hhc (Firm/Company)		
	(Firm/Company)		
4	SGS NAUTZAL CH	•	
<u>.</u>	(Address)		
· £) ESTN F/ 3254 (City/State and Zip Cox	4	•
	(City/State and Zip Coo	le)	
,	ner information concerning this matter, p		1.50-65ZD
_ 17 .1	(Name of Person)	(Area Code & Da	ytime Telephone Number)
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Registrati Division o P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, Florida 32314
Enclose	d is a check for the following amount:	:	
□ #25 F	Siling Fee \$\times	\$55 Filing Fee & Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy

08 MAY 30 PH 4: 09

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

AllEN CAPITAL WHC
(Name of limited liability company)
ACLEN Caprine hh C (Name of limited liability company) Wyomin 6
(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.
4565 NAvrical C+ (Mailing address)
D257in Fl. 3254/ (City/State/Zip)
(City/diate/21p)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
The Marine Manber
(Signature of member or authorized representative of a member)
HARLAN ALLENIZ
(Typed or printed name of signee)

Filing Fee: \$25.00