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L. SELLERS

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SECRE PARY OF STATE
TALLAHASSEE FLORIDA

S III 17 AMIN:

COVER LETTER -

TO:

TO: Registration Section Division of Corporations	•			
SUBJECT: Federal Support Solutions, LLC				
(Name of Foreign Lim	ited Liability Company)			
Dear Sir or Madam:				
The enclosed withdrawal and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to	the following:			
Rama Inguva				
(Name of Person)				
East West Enterprises, Inc.				
(Firm/Company)				
555 Sparkman Drive, Suite 228				
(Address)				
Huntsville, Alabama 35801				
(City/State and Zip Code)	·			
For further information concerning this matter, please call:				
Rama Inguva	, 256 , 704.4103			
(Name of Person) at	(Area Code & Daytime Telephone Number)			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section Division of Corporations	Registration Section			
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327				
2661 Executive Center Circle	Tallahassee, Florida 32314			
Tallahassee, Florida 32301				
Enclosed is a check for the following amount:				
✓\$25 Filing Fee \$30 Filing Fee & \$55 }	Filing Fee & \$\int\\$60 Filing Fee,			
	fied Copy Certificate of Status &			
	Certified Copy			

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

Federal Support Solutions, LLC
(Name of limited liability company)
Nevada
(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.
555 Sparkman Drive, Suite 228 (Mailing address)
Huntsville, Alabama 35801 (City/State/Zip)
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)
Rama Inguva
(Typed or printed name of signee)

Filing Fee: \$25.00

FILED
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