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(Requestor's Name) (Address) (Address)	300110437643							
(City/State/Zip/Phone #)	RECEIVED OT OCT 18 AM 10: 39 DTTT: Street FLORIDAS							
Special Instructions to Filing Officer/	FILED 07 OCT 18 PH 1: 37 SECRE TARY OF STATE TALLAHASSEE, FLORIDA							

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CORPORATION SERVICE COMPANY.

	ACCOUNT NO.	:	072100000	032	The sector	•
	REFERENCE	:	277648	7529182	THE S	1
	AUTHORIZATION	:0	Sputtelle	man	SSEE OF	0
	COST LIMIT	:	\$ 25.00			د
ORDER DATE :	October 18, 2007				A DE	
ORDER TIME :	9:32 AM					
ORDER NO. :	277648-005					
CUSTOMER NO:	7529182			•		
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FOREIGN FILINGS

NAME: PAYROLL ASSET MANAGERS, LLC

CORPORATE LIMITED PARTNERSHIP XX LIMITED LIABILITY COMPANY

_ _ : : : _ _ _ _ _ _ _

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPYXXPLAIN STAMPED COPY _____ CERTIFICATE OF STATUS

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CONTACT PERSON: Carina L. Dunlap - EXT# 2951

EXAMINER:

____ _ _ _ _ _ _

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No. 6891 P. 4

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA PAYROLL ASSET MANAGERS, LLC (Name of limited liability company) DELAWARE (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.

(Mailing address)

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)

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(Typed or printed name of signee)

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Filing Fee: \$25.00

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