m0700004366

(Reque	estor's Name)
(Addre	ss)
(Addre	ss)
(City/S	tate/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busine	ess Entity Name)
(Docur	ment Number)
Certified Copies	Certificates of Status
Special Instructions to Fili	ng Officer:

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FILED SECRETARY OF STATE BIVISION OF CORPORATION

COVER LETTER

'TO: Registratio Division of	n Section f Corporations				12 11
SUBJECT:		ONTROL :			E E
	(Name of F	oreign Limit	ed Liability	y Company)	,
Dear Sir or Madam:					
The enclosed withd	rawal and fee(s) are submitte	ed for filing.			
Please return all cor	respondence concerning this	s matter to the	following	:	
	JAMIE DEWISPELAI	RE			
	(Name of Person)				
	EAD, INC				
	(Firm/Company)				
3	635 S. 149TH STR	EET			
	(Address)				
	OMAHA, NE 6814	4			
	(City/State and Zip Code)				
For further informat	ion concerning this matter, p	please call:			
LI	NDSAY ROUSE	at		(402)496-8800	
(Name of Person)			le & Daytime Telephone Numbe	er)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check	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

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94.S.
A TOPE A
EAD CONTROL SYSTEMS, LLC (Name of limited liability company)
(Name of limited liability company)
NEBRASKA
(Jurisdiction of its organization)
(variouvion of the organization)
M0700004366
(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.
3635 S. 149TH STREET
(Mailing address)
OMAHA, NE 68144
(City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
Styt-Mucht
(Signature of member or authorized representative of a member)
Stephen M. Lighter
(Typed or printed name of signee)

Filing Fee: \$25.00