

M07000004739

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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11 MAR 25 PM 4:57  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

B. KOHR

MAR 25 2011

EXAMINER

FILED  
11 MAR 25 PM 4:59  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Dances With Fish LLC  
(Name of Limited Liability Company)

FILED STATE  
SECRETARY OF CORPORATIONS  
11 MAR 25 PM 4:59

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jane Beale

(Name of Person)

Gloria Rector Vessel Doc. INC

(Firm/Company)

PO Box 6750

(Address)

Lakeland, FL 33807

(City/State and Zip Code)

For further information concerning this matter, please call:

Jane Beale

(Name of Person)

at

(863) 644-5536

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:



\$25.00 Filing Fee



\$30.00 Filing Fee &  
Certificate of Status



\$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)



\$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

DANCES WITH FISH LLC

(Name of limited liability company)

MISSOURI

(Jurisdiction of its organization)

M07000004739

(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.

444 West 47<sup>th</sup> ST, Suite 900

(Mailing address)

Kansas City, MO 64112

(City/State/Zip)

The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.

/s/ DAVID LOCKTON

(Signature of member or authorized representative of a member)

DAVID LOCKTON

(Typed or printed name of signee)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 MAR 25 PM 4:59

**Filing Fee: \$25.00**