

Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

MOT00004789

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To: Division of Corporations  
 Fax Number : (850) 617-6383

From: Account Name : CAPITOL SERVICES, INC.  
 Account Number : 120160000017  
 Phone : (800) 345-4647  
 Fax Number : (800) 432-3622

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**LLC DISSOLUTION OR WITHDRAWAL  
 EAPPEALS COMMERCIAL LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	<b>\$55.00</b>

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MAY 09 2016  
 J. BRUCE



May 4, 2016

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

EAPPEALS COMMERCIAL LLC  
4000 HOLLYWOOD BLVD., SUITE 160N  
HOLLYWOOD, FL 33021

SUBJECT: EAPPEALS COMMERCIAL LLC  
REF: M07000004789

**\*\*\*PLEASE GIVE ORIGINAL SUBMISSION DATE AS FILE DATE\*\*\***  
**5/4/16**

The electronic filing cover sheet submitted with your document reflects the incorrect type of document. The cover sheet must reflect the type of document you are filing. Please generate a new fax audit cover sheet under the appropriate document type. When resubmitting your document for filing, please also send a copy of the incorrect cover sheet marked "ABANDONED".

You must file under limited liability company filings.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing  
Senior Section Administrator

FAX Aud. #: H16000111574  
Letter Number: 816A00009366

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** eAppeals Commercial LLC  
*(Name of Foreign Limited 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:

Gil Perry  
*(Name of Person)*

eReceivables Inc.  
*(Firm/Company)*

4000 Hollywood Blvd, Suite 650N  
*(Address)*

Hollywood, FL 33021  
*(City/State and Zip Code)*

For further information concerning this matter, please call:

Gil Perry at (954) 893-1390 x1110  
*(Name of Person) (Area Code & Daytime Telephone Number)*

**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

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TALLAHASSEE, FLORIDA

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**NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY**

eAppeals Commercial LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

08/08/2007

(Date registered with Florida Department of State)

M07000004789

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.



(Signature of authorized representative)

Gil Perry, CFO parent company

(Typed or printed name of signee)

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TALLAHASSEE, FLORIDA

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Filing Fee: \$25.00