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| (Requestor's Name) | | |
|---|-------------------|-------------|
| (Address) | | |
| (Address) | | |
| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Business Entity Name) | | |
| (Document Number) | | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
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MAR 15 2010

EXAMINER



ACCOUNT NO. : I2000000195

REFERENCE : 316128 7661303

AUTHORIZATION

COST LIMIT

ORDER TIME: 12:56 PM

ORDER NO. : 316128-010

CUSTOMER NO: 7661303

FOREIGN FILINGS

NAME: ID CONEX, LLC

CORPORATE LIMITED PARTNERSHIP XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XXX PLAIN STAMPED COPY _ CERTIFICATE OF STATUS

CONTACT PERSON: Matthew Young - EXT# 2962

EXAMINER:

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

Filing Fee: \$25.00