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(Re	questor's Name)	
(Ad	drėss)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #/)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)	
(Do	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
SECRETARY OF STATE

J. BRYAN

MAR 31 2009

EXAMINER

COVER LETTER

TO: Registration Sec Division of Cor				
SUBJECT: Bule	Name of For	eign Limited Liability (Company)	
Dear Sir or Madam:				
The enclosed withdrawa	and fee(s) are submitte	d for filing.		
Please return all correspo	ondence concerning this	matter to the following	;	SEC SEC
STE	PHO L (Name of Person)	GURSA		MAR 30 PM 2 CRETARY OF S LAHASSEE, FI
	(Name of Person) A Tech vo (Firm/Company)			9 MAR 30 PM 2: 18 SECRETARY OF STATE FALLAHASSEE, FLORIDA
	(Address) Sove NE (City/State and Zip Cod		2D, 32934	
For further information of	oncerning this matter, p	olease call:] 373 862 Daytime Telephone Number)	
STREET/COU Registration Se Division of Cor Clifton Building 2661 Executive Tallahassee, Flo	porations 3 Center Circle	Regist Divisio P.O. B	ING ADDRESS: ration Section on of Corporations sox 6327 assee, 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

Bulova lechnologies LLC
(Name of limited liability company)
DECAMARE
(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.
3900 WEST SARNO Rd. (Mailing address)
·
MECLOOURSE PL 32934 (City/State/Zip)
(City/State/Zip)
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)
STEPHEN L Gurban
Typed or printed name of signee) SECRETARY OF STARY OF S

Filing Fee: \$25.00