M0700006534

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COVER LETTER

Division of Corporations
SUBJECT: TURF Evolutions LLC (Name of Foreign Limited Liability Company)
(Name of Foleign Difficed Diability 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:
PARON Dale (Name of Person)
Greenture Solutions, Lec
175C Comberland Park Drive
ST. Augustine 62 320 95 (City/State and Zip Code)
For further information concerning this matter, please call:
ARON DOLE at (SO4) 623-1256 (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 \$\Bigcup \$30 Filing Fee & B\$55 Filing Fee & S60 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy



November 12, 2008

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AARON DALE 175 C CUMBERLAND PARK DRIVE ST. AUGUSTINE, FL 32095

SUBJECT: TURF EVOLUTIONS, LLC

Ref. Number: M07000006534

We have received your document for TURF EVOLUTIONS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

List the name as it appears on our records.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Letter Number: 308A00056876

Neysa Culligan Document Specialist

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

Name of limited liability company)
(Name of limited liability company)
Georgia (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.
175C Cumberland Park Drive (Mailing address)
ST. Augustine (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) AHT SECOND TO A TO
(Signature of member or authorized representative of a member)
VON KNOX
(Typed or printed name of signee)

Filing Fee: \$25.00