

MO8 0000000 450

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

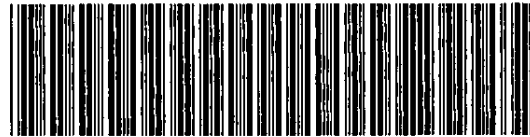
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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T. CLINE

FEB - 3 2012

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 23, 2012

KAREN ANGELOSANTE & JOE DAVENPORT  
6085 UPPER STRAITS BLVD  
WEST BLOOMFIELD, MI 48324

SUBJECT: LC NICEVILLE, LLC  
Ref. Number: M08000000450

We have received your document for LC NICEVILLE, LLC and your check(s) totaling \$30.00. 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.

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) 245-6020.

Tammi Cline  
Regulatory Specialist II

Letter Number: 012A00001553

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TALLAHASSEE, FLORIDA

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LC Niceville, 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:

Karen Angelosante & Joe Davenport  
(Name of Person)

Panhandle Pizza company  
(Firm/Company)

6085 Upper Straits Blvd  
(Address)

W. Bloomfield, MI 48324  
(City/State and Zip Code)

For further information concerning this matter, please call:

Karen Angelosante at (248) 408-8831  
(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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

LC Niceville, LLC

(Name of limited liability company)

Michigan

(Jurisdiction of its organization)

M08000000450

(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.

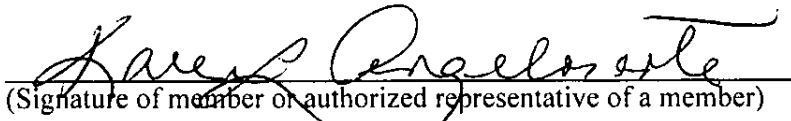
6085 UPPER STRAITS Blvd.

(Mailing address)

W. Bloomfield, MI 48324

(City/State/Zip)

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



(Signature of member or authorized representative of a member)

Karen L. Angelosante

(Typed or printed name of signee)

SECRETARY OF STATE  
ENTERED ASSESSMENT

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Filing Fee: \$25.00