

MO8000000759

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

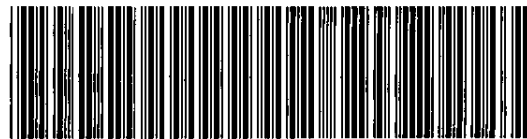
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/25/11--01009--007 **7.50

04/01/11--01008--022 **52.50

FILED
11 APR 22 AM 10:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

APR 25 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Performance Horse Veterinary Services 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:

Earl Kenneth Larsen III (KLN)
(Name of Person)

Performance Horse Veterinary Services LLC
(Firm/Company)

3933- 37th St NW
(Address)

Maple Lake, MN 55358
(City/State and Zip Code)

For further information concerning this matter, please call:

Earl Kenneth Larsen (KLN) at (651) 261-9146
(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

FILED
11 APR 22 AM 10:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
\$52.50 paid per mail
check no 5063 incl
B \$7.50

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

Performance Horse Veterinary Services, LLC
(Name of limited liability company)

Minnesota
(Jurisdiction of its organization)

M08000000759
(Florida Document Number)

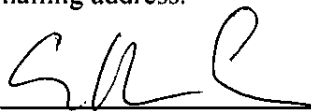
This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.

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.

3933. 37th St NW
(Mailing address)

Maple Lake MN 55358
(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)

E R Larson
(Typed or printed name of signee)

FILED
11 APR 22 AM 10:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 5, 2011

E. KEN LARSON
3933 - 37TH STREET NW
MAPLE LAKE, MN 55358

SUBJECT: PERFORMANCE HORSE VETERINARY SERVICES, LLC
Ref. Number: M08000000759

We have received your document for PERFORMANCE HORSE VETERINARY SERVICES, LLC and your check(s) totaling \$52.50. 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) 245-6028.

Barbara Bostick
Regulatory Specialist II

Letter Number: 911A00008260