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S. HAWKES

APR 7 2010

EXAMINER

COVER LETTER

	ration Section on of Corporations		
SUBJECT: _	Candid Clubs, LLC		
	(Name of Fo	oreign Limited Liability	Company)
Dear Sir or Ma	dam:		
The enclosed w	rithdrawal and fee(s) are submitt	ed for filing.	
Please return al	I correspondence concerning thi	s matter to the followir	og:
Julie Fields			
Julie Fields	(Name of Person)		_
Candid Clu	bs, LLC		
	(Firm/Company)		_
3000 E. 14	h Avenue		
	(Address)	- <u></u>	− Ogjet
0 1 1 3 2	011 40040	(, · · ·	
Columbus,	OH 43219 (City/State and Zip Coo	· ·	-
	(Chyrstate and Zip Co	uc)	
For further info	rmation concerning this matter,	please call:	
	· · ·	•	
Julie Fields		at (614	₎ 253-1996 x 1168
	(Name of Person)	(Area Code &	2 Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 Cinclosed is a check for the following amount: MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 Cinclosed is a check for the following amount:		tration Section ion of Corporations Box 6327	
□ \$25 Filing Fe		\$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

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Candid Clubs, LLC
(Name of limited liability company)
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Ohio Programment of the control of t
(Jurisdiction of its organization)
M08000002685
(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.
3000 E. 14th Avenue
(Mailing address)
Columbus, OH 43219
(City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
Ji Lild
(Signature of member or authorized representative of a member)
Julie Fields, Controller
(Typed or printed name of signee)

Filing Fee: \$25.00