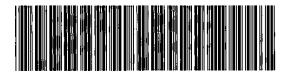
## M080000340Z

<u> </u>
(Requestor's Name)
(Address)
(Address)
(variess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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G. MCLEOD

JIIN 0 9 2010

**EXAMINER** 



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SECRETARY OF STATE

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Fisher Sigerson Morrison LLC (Name of Foreign Limited Liability Company)
(Name of oreign 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:
Matt Burris (Name of Person)
Fisher Sigerson Morrison LL C
5 Greenwich Office Park
(City/State and Zip Code)
For further information concerning this matter, please call:
Matt Burris at (203) 302-2885 (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301
Enclosed is a check for the following amount:
\$25 Filing Fee \$\Bigcup \$30 Filing Fee & Certificate of Status \$\Bigcup \$55 Filing Fee & Certificate of Status & Certified Copy

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

Fisher Sigerson Morrison LLC (Name of limited liability company)
Delaware (Jurisdiction of its organization)
(Jurisdiction of its organization)
M0800003402
(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.
5 Greenwich Office Park (Mailing address)
Greenwich, CT 06831 (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)
(Signature of memory of authorized representative of a memory)
(Typed or printed name of signee)
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Filing Fee: \$25.00