

MD8000004570

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

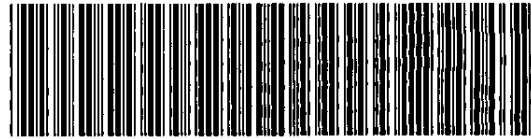
Special Instructions to Filing Officer:

A. LUNT

NOV 23 2010

EXAMINER

Office Use Only



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11/22/10--01022--002 **25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Attached are the forms and instructions to **withdraw the authority of a foreign limited liability company**. The requirements are as follows:

➤ Pursuant to s. 608.511, Florida Statutes, the attached withdrawal application must be completed in its entirety.

➤ The fees are as follows:

\$25.00 Filing Fee
\$30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

➤ A letter of acknowledgment will be issued free of charge upon withdrawal. Submit one check made payable to the Florida Department of State for the total amount of the filing fee and any optional certificate or copy.

➤ A COVER letter should be submitted along with the application and check. The mailing address and courier address are noted below.

➤ Please send the application to:

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

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Any further inquiries concerning this matter should be directed to the Registration Section by calling (850) 245-6051.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Forest Systems Management Company, 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:

Glenn Murray

(Name of Person)

Forest Systems Management Company, LLC

(Firm/Company)

325 Fifth Avenue, Suite 207

(Address)

Indialantic, FL 32903

(City/State and Zip Code)

For further information concerning this matter, please call:

Glenn Murray

(Name of Person)

at (772) 696-0800

(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**

Forest Systems Management Company, LLC
(Name of limited liability company)

Delaware
(Jurisdiction of its organization)

M08000004570
(Florida Document Number)

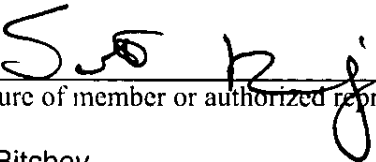
This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.

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.

325 Fifth Avenue, Suite 207
(Mailing address)

Indianapolis, IN 46203
(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)

Scott Ritchey
(Typed or printed name of signee)

Filing Fee: \$25.00

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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