M09000008647

(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:

Office Use Only

100215228581

01/03/12--01003--003 **25.00

FILED
11 DEC 30 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
JAN 03 2011
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Coastal Unlimited of Central Florida 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:

Brian L Johns Sr
(Name of Person)

Coastal Unlimited of Central Florida LLC
(Firm/Company)

158 Mackay Drive
(Address)

Brunswick GA 31525
(City/State and Zip Code)

FILED
11 DEC 30 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Brian Johns at (931) 484-3019
(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

FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 15, 2011

BRIAN L. JOHNS SR.
158 MACKAY DRIVE
BRUNSWICK, GA 31525

SUBJECT: COASTAL UNLIMITED OF CENTRAL FLORIDA, LLC
Ref. Number: M09000000864

We have received your document for COASTAL UNLIMITED OF CENTRAL FLORIDA, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for $25.00.

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) 245-6984.

Deborah Bruce
Regulatory Specialist II

Letter Number: 311A00027969

FILED
11 DEC 30 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Coastal Unlimited of Central Florida LLC
(Name of limited liability company)

FLORIDA
(Jurisdiction of its organization)

M09000000864
(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.

158 Mackay Drive
(Mailing address)

Brunswick GA 31525
(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)

Brian L Johns, Sr.
(Typed or printed name of signee)

FILED
11 DEC 30 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: $25.00