M09000000003

(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
MAR 29 2010
EXAMINER

Office Use Only



100199195201

100199195201 03/25/11--01024--007 **25.00



COVER LETTER

то:		istration sion of C	Section Corporations			
SUBJE	CT:	Gecko	otech, LLC		·	
			(Name of Fo	reign Limited Liabilit	y Company)	
Dear Si	r or M	ladam:				
The enc	losed	withdra	wal and fee(s) are submitte	ed for filing.		
Please r	eturn	all corre	spondence concerning this	matter to the followi	ng:	
Joshu	a Ro	bbins				
			(Name of Person)		_	
						\$7.00 pt
Geck	otech	ı, LLC				Fig. Eq.
			(Firm/Company)		_	
200 N	. Et-	مادمطم	St Sta E10 C			To the second
300 N		abein	St Ste 510-C (Address)		_	
			(Madress)			##
Chica	go, l	L 6060	7			
			(City/State and Zip Cod	e)		
For furt	her in	formatio	n concerning this matter, p	blease call:		
Joshu	a R0	Obbins		_{at (} 312	, 9482996	
		(Nar	ne of Person)		& Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations			Section	MAILING ADDRESS: Registration Section Division of Corporations		
Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301			ing ve Center Circle	P.O. Box 6327 Tallahassee, Florida 32314		
Enclose	d is a	check f	or the following amount:			
☑ \$25 I	Filing	Fee	■ \$30 Filing Fee & Certificate of Status	☐ \$55 Filing Fee & Certified Copy	☐ S60 Filing Fee, Certificate of Status & Certified Copy	

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

Geckotech, LLC
(Name of limited liability company)
70 TO THE REPORT OF THE REPORT
(Jurisdiction of its organization)
M09000002003 25
(Florida Document Number)
This limited liability company is no longer transacting business in Florida and surrenders 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.
300 N Elizabeth St Ste 510-C
(Mailing address)
Chicago, IL 60607
(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)
(organism of member of authorized representative of a member)
Joshua Robbins
(Typed or printed name of signee)

Filing Fee: \$25.00