

MO900000 2279

(Requestor's Name)

LES - COMPANIES
701 HARGER RD, #100
OAK BROOK, IL 60523

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

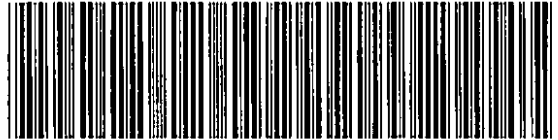
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

\$25.00

Office Use Only



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04/21/20--01011--022 **70.00

2020 JUL 01 PM 2:27

1011

Withdrawal

JUL 01 2020

1 ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WEST-CONTINENT ENERGY SERVICES, 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:

KARI BLANKENSHIP

(Name of Person)

CES-COMPANIES

(Firm/Company)

701 HARGER ROAD, SUITE 100
(Address)

OAK BROOK, IL 60523

(City/State and Zip Code)

For further information concerning this matter, please call:

KARI BLANKENSHIP at (630) 575-2304
(Name of Person) (Area Code & Daytime Telephone Number)

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

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &
Certified Copy | <input type="checkbox"/> \$60 Filing Fee,
Certificate of Status &
Certified Copy |
|--|---|--|--|



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 6, 2020

CES - COMPANIES
701 HARGER RD #100
OAK BROOK, IL 60523

SUBJECT: WEST-CONTINENT ENERGY SERVICES, LLC
Ref. Number: M09000002279

We have received your document for WEST-CONTINENT ENERGY SERVICES, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 620A00009164

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

WEST-CONTINENT ENERGY SERVICES, LLC

(Name of limited liability company)

DELAWARE

(Jurisdiction of its organization)

5/17/2011

(Date registered with Florida Department of State)

M09000002279

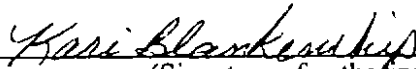
(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

Effective Date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.



(Signature of authorized representative)

KARI BLANKENSHIP

(Typed or printed name of signee)

Filing Fee: \$25.00

2020 JUN 30 PM 2:27