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(Re	equestor's Name)	
(Ad	ldress)	
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2010 OCT 12 AH 11: 09
SECRETARY OF STATE

J. SAULSBERRY EXAMINER

OCT 13 2010

COVER LETTER

TO: Registration Division of C					
SUBJECT: Atlant	ic Coast Aviation, LL				
	(Name of For	eign Limited Liability (Company)		
Dear Sir or Madam:					
The enclosed withdraw	wal and fee(s) are submitte	ed for filing.			
Please return all corre	spondence concerning this	matter to the following	3		
Clay Blue					
	(Name of Person)				•
Murphy Investm	ent Group, Inc.				
	(Firm/Company)				
PO Box 160					
	(Address)			7	
Wallace, NC 28	466		•	2010 OCT 12 SECRETARY! ALLAHASSEE	
	(City/State and Zip Cod	e)		CT I	4
For further informatio	n concerning this matter, p	olease call:		2 AM II: 09	į [II]
Clay Blue		at (910	285-1047	TATE ORID	
(Nar	ne of Person)		Daytime Telephone Number	r) ^{to} G	
	OURIER ADDRESS:		ING ADDRESS:		
Registration Division of C		Registration Section Division of Corporations			
Clifton Build 2661 Executi	ling ive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314			
	Florida 32301		,		
Enclosed is a check f	or 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	&	

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

Atlantic Coast Aviation, LLC	
(Name of limited liability company)	-
North Carolina	
(Jurisdiction of its organization)	
M0900003210	
(Florida Document Number)	
This limited liability company is no longer transacting business in Florid authority to transact business in this state.	la and surrenders its
This limited liability company revokes the authority of its registered agent its behalf and appoints the Department of State as its agent for service of cause of action arising during the time it was authorized to transact business	to accept service on f process based on a in Florida.
PO Box	
(Mailing address)	
Wallace, NC 28466	
(City/State/Zip)	
The limited liability company agrees to notify the Department of State change in its mailing address.	in the future of any
Clay Blue	
(Signature of member or authorized representative of a member)	TALS 2
Clay Blue	ECH LA
(Typed or printed name of signee)	EM 8 .

Filing Fee: \$25.00