M09000004145

. (Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



700173835257

04/05/10--01006--030 **25.00

FILED

10 APR-5 PH 3: 27

SECRETARY OF STATE

J. BRYAN

APR - 6 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 1010 Solutions 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:
(Name of Person)
INO GREAT BRANDS, INC
1010 Taylor Station Rd., Ste A Gammy Ott 43230 (City/State and Zip Code)
For further information concerning this matter, please call: (Name of Person) at (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 \$\times \text{\$\text{\$\text{\$\text{S55} Filing Fee & }}}\$55 Filing Fee \$\text{\$\}\$}}}\$}\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\tex{

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

1010 Solutions 1.16
(Name of limited liability company)
OH
(Jurisdiction of its organization)
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.
1010 TAYLOR STATION R. Str. A
GAMMA OH 43230 (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)
- Jim Dolin
(Typed or printed name of signee)

Filing Fee: \$25.00