

MI0000000070

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

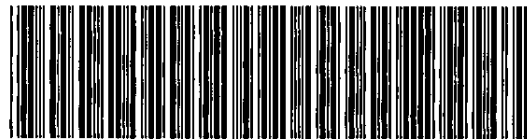
(Business Entity Name)

(Document Number)

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2014-03-08 PM 10:30  
2014-03-08 PM 10:30

B. BOSTICK

APR - 9 2014

EXAMINER

**BOSE  
McKINNEY  
& EVANS LLP**

ATTORNEYS AT LAW

**Patty A. Miller, RP**

*PACE Registered Paralegal®*

Direct Dial: (317) 684-5261

Fax: (317) 223-0261

E-Mail: PMiller@boselaw.com

April 4, 2014

**VIA CERTIFIED MAIL  
RETURN RECEIPT REQUESTED**

Florida Department of State  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314


Re: Koorsen Properties, LLC

Dear Sir or Madam:

Enclosed please find an original, manually-signed and two (2) copies of a Notice of Withdrawal of Certificate of Authority, along with the statutory filing fee of \$25.00. Please file the enclosed Application in your office and return a file-stamped copy to me in the enclosed self-addressed, stamped envelope.

Thank you in advance for your assistance in this matter. In the event you should have any questions or comments regarding the enclosed, please do not hesitate to contact me.

Sincerely,



Patty A. Miller, RP  
PACE Registered Paralegal

PAM/lsc  
Enclosures

2551011\_1

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Koorsen Properties, 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:

Patty Miller

(Name of Person)

Bose McKinney & Evans LLP

(Firm/Company)

111 Monument Circle, Suite 2700

(Address)

Indianapolis, Indiana 46204

(City/State and Zip Code)

For further information concerning this matter, please call:

Patty Miller

(Name of Person)

at 317 684-5261  
(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

2014-03-03 P 4:30  
FILED

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Koorsen Properties, LLC

(Name of limited liability company)

Indiana

(Jurisdiction of its organization)

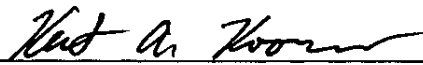
January 4, 2010

(Date registered with Florida Department of State)

M10000000070

(Florida Document Number)

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



4/1/2014

(Signature of authorized representative)

Keith A. Koorsen, Manager

(Typed or printed name of signee)

Filing Fee: \$25.00

2014-04-01 10:30  
FILED

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Koorsen Properties, LLC

(Name of limited liability company)

Indiana

(Jurisdiction of its organization)

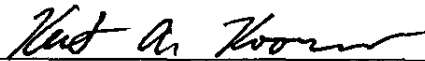
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4/1/2014

(Signature of authorized representative)

Keith A. Koorsen, Manager

(Typed or printed name of signee)

Filing Fee: \$25.00

2014-01-09 PM 4:30

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