M1000000472

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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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SECRETARY OF STATE

- COVER LETTER

TO: Registration Section Division of Corporations		•
SUBJECT: Caprock Environmental Sel	rvices, LLC	4
(Name of Fore	eign Limited Liability	Company)
Dear Sir or Madam:		
The enclosed withdrawal and fee(s) are submitted	d for filing.	,
Please return all correspondence concerning this	matter to the following	3
Heather Kendrick (Name of Person)	a to the same of t	and the second s
Caprock Environmental Services, LL	_C ,	•
(Firm/Company)	,	•
2884 Devils Glen Rd., PMB 351 (Address)		. :
Bettendorf, IA 52722		
(City/State and Zip Code	2)	,
For further information concerning this matter, pl	lease call:	
Heather Kendrick		359-0951
(Name of Person)	(Area Code &	Daytime Telephone Number)
Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Regist Divisio P.O. B Tallah	LING ADDRESS: ration Section on of Corporations tox 6327 assee, Florida 32314
Enclosed is a check for the following amount:		•
■ \$25 Filing Fee ■ \$30 Filing Fee & Certificate of Status	☐ \$55 Filing Fee & Certified Copy	Sectificate of Status & Certified Copy

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

Caprock Environmental Services, LLC				
(Name of limited liability company)				
	ι			
Texas	1			
(Jurisdiction of its organization)				
M1000000472	•			
(Florida Document Number)				
This limited liability company is no longer transacting business in authority to transact business in this state.	-Florida∗a !	nd-surrender	rs its -	
This limited liability company revokes the authority of its registered its behalf and appoints the Department of State as its agent for ser cause of action arising during the time it was authorized to transact by	agent to a vice of prousiness in F	accept service ocess based Florida SEURE	e on a	
2884 Devils Glen Rd. PMB 351	•	A		<u> </u>
(Mailing address) Bettendorf, IA 52722	,	RY OF STA	3 AH II: 54	LED
(City/State/Zip)	•	DA TH	F	•
The limited liability company agrees to notify the Department of change in its mailing address.	State in t	he future of	any	
deather Kendrick				
(Signature of member or authorized representative of a member)				

Filing Fee: \$25.00

Heather Kendrick

(Typed or printed name of signee)