HII DOCOODS977

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer: L. SELLERS		
EXAMINER		

Office Use Only

FEB 14 2012 L. SELLERS



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01/06/12--01027--008 **30.00

12 FEB 13 PH 5: 2 L SECRETARY OF STATE TALLAHASSEE, FLORIDA December 30, 2011

Hope S. Babcock 4560 Horseshoe Bend Merritt Island, fL 32953 321-452-4290 (office) 321-452-4290 (Fax)

Registration Section
Department of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Cover letter for withdrawal of LLC coporation doing business in FL as Sun Family

Transportation Services LLC.

File #: 90-0652989

To Whom It May Concern:

Family Transportation Services LLC has been dissolved as a corporation with the State Of Delaware as of this date, December 30, 2011 according to all rules/regulations of that state.

I am the sole owner/member of this corporation.

I have included a check in the amount of \$30 to cover costs of filing this withdrawal in the State Of Florida, including a Certificate Of Status for Family Transportation Services LLC doing business as Sun Family Transportation Services LLC in Florida.

\$

Thank you for your time and attention to this matter.

me S. Babeack

Hope S. Babcock

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Sun Family Transportati	on Services LLC
(Patite of Poleig	in Emilieu Liability Company)
Dear Sir or Madam:	
The enclosed withdrawal and fee(s) are submitted f	or filing.
Please return all correspondence concerning this ma	atter to the following:
Hope S. Babcock	·
(Name of Person)	
Sun Family Transportation Servic	es LLC
(Firm/Company)	
4560 Horseshoe Bend	
(Address)	
Merritt Island , FL 32953	
(City/State and Zip Code)	
For further information concerning this matter, plea	se call:
Hope Babcock	at (321) 452-4290
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301	

☐ \$55 Filing Fee & Certified Copy

Enclosed is a check for the following amount:

□ \$25 Filing Fee

\$30 Filing Fee & Certificate of Status 2 FEB 13 PH 5-21

Certificate of Status & SECOND SECOND



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 8, 2012

HOPE S. BABCOCK 4560 HORSESHOE BEND MERRITT ISLAND, FL 32953

SUBJECT: SUN FAMILY TRANSPORTATION SERVICES LLC

Ref. Number: M11000000897

We have received your document for SUN FAMILY TRANSPORTATION SERVICES LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your document is being returned as requested.

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) 245-6967.

Leslie Sellers Regulatory Specialist II

Letter Number: 012A00005519

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

(Sun) Family Transportation Services LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
90-0652989
(Florida Document Number)
This limited liability company is no longer transacting business in Florida and surrenders is authority to transact business in this state.
This limited liability company revokes the authority of its registered agent to accept service of its behalf and appoints the Department of State as its agent for service of process based on cause of action arising during the time it was authorized to transact business in Florida.
4560 Horseshoe Bend
(Mailing address)
Merritt Island, FL 32953
(City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of a change in its mailing address.
Hore S. Babeack
(Signature of member or authorized representative of a member)
Hope S. Babcock
(Typed or printed name of signee)

Filing Fee: \$25.00