

MI1000000919

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

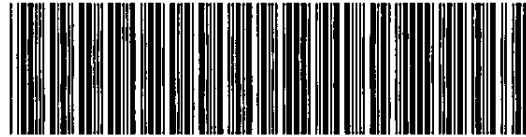
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400255297164

01/13/14--01009--001 \*\*25.00

FILED  
14 FEB -3 PM 1:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1-5-2014 FEB -5 2014

*[Handwritten signature]*

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Kersey Lane Capital, 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:

Gary Kay  
(Name of Person)

Masters Research Partners  
(Firm/Company)

2080 N.W. Boca Raton Blvd. #4  
(Address)

Boca Raton, FL 33431  
(City/State and Zip Code)

For further information concerning this matter, please call:

Gary Kay at ( 561 ) 287-4650  
(Name of Person) (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: Already sent in \$25 check/fee

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|--|---|--|--|



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 21, 2014

GARY KAY  
2080 NW BOCA RATON BLVD #4  
BOCA RATON, FL 33431

SUBJECT: KERSEY LANE CAPITAL, LLC  
Ref. Number: M11000000919

We have received your document for KERSEY LANE CAPITAL, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You submitted the wrong type of form, proper forms are enclosed.

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) 245-6051.

Tim Burch  
Regulatory Specialist II

Letter Number: 714A00001317

**NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY**


Kersey Lane Capital, LLC  
(Name of limited liability company)

Delaware  
(Jurisdiction of its organization)

2/22/11  
(Date registered with Florida Department of State)

M11000000919  
(Florida Document Number)

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

  
(Signature of authorized representative)

Gary Kay  
(Typed or printed name of signee)

**FILED**  
14 FEB -3 PM 1:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Filing Fee: \$25.00**