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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : 120160000017

Phone : (855) 498-5500

Fax Number

: (800)432-3622

LLC DISSOLUTION OR WITHDRAWAL SUMMIT ESP, LLC

Certificate of Status	0
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NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

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Summit ESP, LLC		
	2	20
(Name of limited liability company)	>> 	20
	<u> </u>	O MAR
Oklahoma	-	-1 ••
(Jurisdiction of its organization)	•	~ :
	~ <u>:</u>	P 1 1
October 19, 2011		1
(Date registered with Florida Department of State)	<u> 14 %</u> ,	<u> </u>
M11000005243		4 3
(Florida Document Number)		
This limited liability company is withdrawing its certificate of authority in the		
This limited liability company is withdrawing its certificate of authority in th	is state.	
Effective Date, if other than the date of filing:	(optio	nal)
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Effective Date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to more than 90 days after filing.)	(optio	g or
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