

M 11 000000 5510

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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12 NOV 29 PM 5:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** A Coach For Life Training LLC

(Name of Foreign Limited Liability Company)

Cross Ref Coach For Life LLC

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marcia Collins

(Name of Person)

Coach For Life LLC

(Firm/Company)

525 Emory Oak Street

(Address)

Ocoee, FL 34761

(City/State and Zip Code)

For further information concerning this matter, please call:

Marcia Collins

(Name of Person)

at 407 614-4707

(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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

A Coach For Life Training LLC -Cros Ref:Coach ForLife LLC  
(Name of limited liability company)

California

(Jurisdiction of its organization)

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(Florida Document Number)

This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.

This limited liability company revokes the authority of its registered agent to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business in Florida.

525 Emory Oak Street

(Mailing address)

Ocoee FL 34761

(City/State/Zip)

The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.

Marcia Collins, Manager

(Signature of member or authorized representative of a member)

Marcia Collins, Manager

(Typed or printed name of signee)

**Filing Fee: \$25.00**

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TALLAHASSEE FLORIDA  
SECRETARY OF STATE