## M1100000607

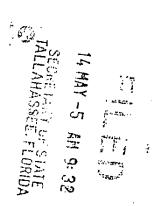
(Re	questor's Name)	
(Add	dress)	
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	·	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Bu	siness Entity Nan	ne)
(Do	cument Number)	<del></del>
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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## COVER LETTER

TO: Registration Division of	n Section Corporations		
SUBJECT:	Forever Laz	y LLC	
	(Name of For	eign Limited Liability C	Company)
Dear Sir or Madam:			
The enclosed withdr	awal and fee(s) are submitte	d for filing.	
Please return all con	respondence concerning this	matter to the following:	
David	C. Hibler (Name of Person)		
	(Name of Person)		
Forever	Lazy LLC (Firm/Company)		
1222 N	Cass St. #	102	
Milwauke	e, WI 5320 (City/State and Zip Cod	) <u>2</u> le)	
For further informat	on concerning this matter, p	elease call:	
David C	Hibler	at (262	327-243/ Daytime Telephone Number)
(N	ame of Person)	(Area Code &	Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations		MAILING ADDRESS: Registration Section Division of Corporations	
	iding itive Center Circle s, Florida 32301	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

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Forever Lazy LLC (Name of limited liability company)	
(Name of limited liability company)	<del></del>
Hillsborough Courty (Jurisdiction of its organization)	<del>yg. 1-97-97-81-1-</del>
	<del>,</del>
(Date registered with Florida Department of State)	
M 11000006077	
(Florida Document Number)	
This limited liability company is withdrawing its certificate of authority in this state.	
Sand C. Helle	
(Signature of authorized representative)	
David C. Hibler	
	) ,
(Typed or printed name of signee)  SECRETARY OF STATE PLORID	Total and the second se

Filing Fee: \$25.00