M1100000 6a80

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	ısiness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
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16 APR 12 PM 1: 38

J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: TOUCK PAU GEN PAR 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:		
DAN BURGESS (Name OPerson)		
Touch Pay (Find/Company)		
7801 MESQUITE BEND #101		
TRUING TX 75063 (City/State and Zip Code)		
For further information concerning this matter, please call:		
DAN BORGESS at (972) 672-0477 (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:		
□ \$25 Filing Fee □ \$30 Filing Fee & □ \$55 Filing Fee & □ \$60 Filing Fee, Certificate of Status □ \$55 Filing Fee & □ \$60 Filing Fee, Certificate of Status & Certified Copy		



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FLORIDA DEPARTMENT OF STATE CORLIARY OF STATE Division of Corporations TALLAHASSEE, FLORIDA

April 4, 2016

DAN BURGESS 7801 MESQUITE BEND DRIVE, SUITE 101 IRVING, TX 75063

SUBJECT: TOUCHPAY GENPAR, LLC

Ref. Number: M11000006280

We have received your document for TOUCHPAY GENPAR, 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):

The form you submitted is for a GP, but your entity is a FOREIGN LLC. Please complete and return the enclosed blank form(s).

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 116A00006840

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NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Touch Pay GENTAR LLC (Name of limited liability company)
(Name of limited liability company)
(Jurisdiction of its organization)
(Jurisdiction of its organization)
(Date registered with Florida Department of State)
(Date registered with Florida Department of State)
M11000006280
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
Jamil BRX
(Signature of authorized representative)
(
DAN BURGESS
(Typed or printed same of signee)

Filing Fee: \$25.00

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SECNESARY OF STATE