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To:

Division of Corporations

: (850)617-6383 Fax Number

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092

Fax Number

: (850)878-5368

## LLC DISSOLUTION OR WITHDRAWAL ALCURT PORT RICHEY LLC

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4/16/2013

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## **COVER LETTER**

TO: Registration Division of	n Section Corporations				
SUBJECT: Alcurt	Port Richey LLC				
SUBJECT! Manie		eign Limited Liability (	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	:		
Lou Ann Morse					
	(Name of Person)				
Alcurt Port Richey	LLC				
<del></del>	(Firm/Company)			" <del>-,</del> 1	•
380 Union St., Suite	: 300				2013 APR
	(Address)		•		22
West Springfield, N	1A 01089			35. 7.	9
· · · · · · · · · · · · · · · · · · ·	(City/State and Zip Cou	ic)	•	で <sub>2</sub> 2 四点	
For further informat	ion concerning this matter, p	dease call:			& <b>2</b> 2
Lou Ann Morse		413 al (	439-6381	,,,,	
<u>(h</u>	tame of Person)		Daytime Telephone Number)		
Registratio Division of Clifton But 2661 Exect	Corporations	Regist Divisi P.O. E	ING ADDRESS: ration Section on of Corporations lox 6327 assee, Florida 32314		
Enclosed is a check	for the following amount:				
S25 Filing Fee	☐ \$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	S60 Filing Fee, Certificate of Status & Certified Copy		

. . . . . .

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

Alcun Port Richey LLC			
	(Name of lim	led liability company)	
Delaware			
	(Jurisdictio	of its organization)	
M12000006472			
	(Florida [	locument Number)	
This limited liability compauthority to transact busine	pany is no longe ss in this state.	r transacting business in Flor	ida and surrenders its
This limited liability compact the De of action arising during the	any revokes the a partment of State time it was autho	othority of its registered agent as its agent for service of pro- rized to transact business in Fl	to accept service on its peess based on a cause lorida.
21 Ramah Circle			AHA
(Mailing address)			A SEE
Agawam	MA	01001	
(City/State/Zip)			<i> ∪</i> :
			93 <b>9</b>
in its mailing address.  Deum U	the	y the Dopartment of State in the	
(Signature of member or a Dean Curtin Vice Preside		tative of a member)	
(Typed or printed name of	signee)		

Filing Fee: \$25.00