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(Requestor's Name) (Address) (Address)	400256036284
(City/State/Zip/Phone #)	<b>400256036284</b> 02/11/1401013007 **60.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	FILED 14 FEB 11 AH 8: 38 SECKELARY OF STATE TALLAHASSEE, FLORIDA
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	FEB 1 3 2014 <b>T. BROWN</b>

484	z Listen s Artista (198	<b>COVER LETTER</b>
TO:	Registration Section Division of Corporations	

#### Machine City USA, LLC SUBJECT:

(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:

Lewis R. LaRoche, Sr. (Name of Person)

# Machine City, USA, LLC

(Firm/Company)

### 4327 South Hwy. 27 Suite 501

(Address)

## Clermont, Florida 34711

(City/State and Zip Code)

For further information concerning this matter, please call:

Lewis LaRoche, Sr.

(Name of Person)

<u>,648-1578</u> Area Code & Daytime Telephone Number)

**MAILING ADDRESS:** 

**Division of Corporations** 

Tallahassee, Florida 32314

**Registration Section** 

P.O. Box 6327

#### STREET/COURIER ADDRESS:

**Registration Section Division of Corporations Clifton Building** 2661 Executive Center Circle Tallahassee, Florida 32301

#### Enclosed is a check for the following amount:

□ \$25 Filing Fee

□ \$30 Filing Fee & Certificate of Status

502

S55 Filing Fee & \$60 Filing Fee, Certified Copy Certificate of Status & Certified Copy



### NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORIT

## Machine City USA, LLC

(Name of limited liability company)

**Kentucky** 

(Jurisdiction of its organization)

01/03/13

(Date registered with Florida Department of State)

M1300000083

(Florida Document Number)

This limited liability company withdrawing its certificate of authority in this state.

(Signature of authorized representative)

(Typed or printed name of signee)

Filing Fee: \$25.00