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(Requestor's Name)	
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(City/State/Zip/Phone #)	10/17/1301022020 **25.00
(Business Entity Name)	
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COVER LETTER



TO: Registration Section **Division of Corporations**

Recovery Group, LLC SUBJECT: BIODO

(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:

Jeff Wood

(Name of Person)

PINNACLE Licensing Solutions, Inc.

(Firm/Company)

103 N. Goliad, Suite 204

(Address)

Rockwall, TX 75087

(City/State and Zip Code)

For further information concerning this matter, please call:

Jeff Wood

(Name of Person)

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:

S25 Filing Fee

□ \$30 Filing Fee & Certificate of Status

□ \$55 Filing Fee & Certified Copy

□ \$60 Filing Fee. Certificate of Status & Certified Copy

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

329-4529

(Area Code & Daytime Telephone Number)

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

Global Recovery Group, LLC

(Name of limited liability company)

Wyoming

(Jurisdiction of its organization)

M1300000517

(Florida Document Number)

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

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

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1721 W. Greentree Dr., Suite 101

(Mailing address)

Tempe, AZ 85284

(City/State/Zip)

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

wher or authorized representative of a member) (Signature

John W. Reif

(Typed or printed name of signee)