M1300000 4403

| (Re | questor's Name) | <u></u> |
|-------------------------|-------------------|-------------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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SEORE IARY OF STATE ALLAHASSEL I LUMBA

APR 1 0 2013

T. HAMPTON

COVER LETTER

| Division of | Corporations | | |
|---|---|---------------------------------------|--|
| SUBJECT: | Solutions, LLC | | |
| | (Name of For | reign Limited Liability (| Company) |
| Dear Sir or Madam: | | | |
| The enclosed withdr | rawal and fee(s) are submitte | d for filing. | |
| Please return all cor | respondence concerning this | matter to the following: | : |
| Marion L. Garn | nan | | |
| | (Name of Person) | | |
| McNamee & M | cNamee, PLL | | |
| | (Firm/Company) | | |
| 2625 Common | s Blvd. | | |
| | (Address) | | |
| Beavercreek, (| DH 45431 | | |
| | (City/State and Zip Cod | le) | |
| For further informat | ion concerning this matter, p | lease call: | |
| Marion L. Garn | nan | 937 at (| 427-1367 |
| (N | lame of Person) | (Area Code & | Daytime Telephone Number) |
| Registratio Division of Clifton Bui 2661 Exect | `Corporations | Regist Divisio P.O. B | ING ADDRESS: ration Section on of Corporations sox 6327 assee, 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

| JJR Solutions, LLC | | |
|--------------------|--|--|
| | (Name of limited liability company) | |
| Ohio | | |
| | (Jurisdiction of its organization) | |
| July 8, 2013 | | |
| | (Date registered with Florida Department of State) | |
| M13000004403 | · | |
| • | (Florida Document Number) | |

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

(Signature of authorized representative)

David L. Judson, Jr.

(Typed or printed name of signee)

Filing Fee: \$25.00

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