

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)
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DIVISION OF CONTORATIONS

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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: SWR LL aba F (Name of Foreign Limite		
Dear Sir or Madam:		
The enclosed withdrawal and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to th	e following:	
Dana Ward (Name of Person)		
SWR UC		
3200 Merrian Lane H	3	
Kansas City KS 6610k)	
For further information concerning this matter, please call:		
Dana Ward	785 375-9623 Area Code & Daytime Telephone Number)	
(Name of Person) (7	Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Fallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Fullahassee, Florida 32314	
Enclosed is a check for the following amount:		
\$25 Filing Fee S \$30 Filing Fee & \$55 Filing Fee & Certificate of Status Certific		

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

SWRLLC -
(Name of limited fiability company)
(Name of limited fiability company) (Name of limited fiability company) (Signature of limited fiability company) (Jurisdiction of its organization)
(Jurisdiction of its organization)
10-20-2015
(Date registered with Florida Department of State)
(Jurisdiction of its organization) 10 -25-2015 (Date registered with Florida Department of State) M 1500008464 (Florida Document Number)
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
Effective Date, if other than the date of filing: 7-10-1 (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or
more than 90 days after filing.)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements,
this date will not be listed as the document's effective date on the Department of State's records.
D-hw/
(Signature of authorized representative)
Dana M Ward
(Typed or printed name of signee)

Filing Fee: \$25.00