

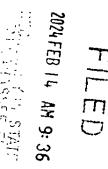
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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02/14/24--01017--002 **25.00





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are the form and instructions to withdraw and cancel the certificate of authority of a foreign limited liability company. The requirements are as follows:

- Pursuant to s. 605.0910, Florida Statutes, the attached withdrawal application must be completed in its entirety.
- The fees are as follows:

\$25.00 Filing Fee

\$30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

- A letter of acknowledgment will be issued free of charge upon withdrawal. Submit one check made payable to the Florida Department of State for the total amount of the filing fee and any optional certificate or copy.
- A COVER letter should be submitted along with the application and check. The mailing address and courier address are noted below.
- ← Please send the application to:

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Any further inquiries concerning this matter should be directed to the Registration Section by calling (850) 245-6051.

COVER LETTER

то:	Registration Division of	n Section Corporations		
SUBJ	ECT:	PetroPower, LLC		
		(Name of Fore	ign Limited Liability	Company)
Dear S	ir or Madam:			
The er	iclosed withdr	awal and fee(s) are submitted	for filing.	
Please	return all con	respondence concerning this t	natter to the following	3:
	David	D. Mitchell (Name of Person)		-
	P	etroPower LLC		_
		etroPower, LLC (Firm/Company)		
	3003	E 37th Street N (Address)	Ste 100	-
	Wi	chita, KS 67212 (City/State and Zip Code	·)	-
For fu	rther informa	tion concerning this matter, pl	lease call:	
		Fischer Vanue of Person)	at (316 (Area Code 8) 685-1600 E Daytime Telephone Number)
	Division P.O. Box	ion Section of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Encle	sed is a chec	k for the following amount:		
%]\$2	5 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

PetroPower, LLC (Name of limited liability company)
Kans as (Jurisdiction of its organization)
06/27/2023 (Date registered with Florida Department of State)
M2300008902 (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:
(Signature of authorized representative)
David D. Mitchell Managing Member (Typed or printed name of signee)

Filing Fee: \$25.00