

197000000084

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

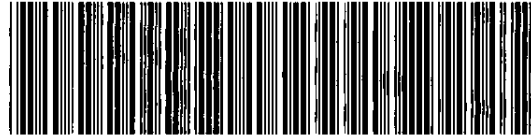
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JUN 17 2011

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CAM OF ILLINOIS, LLC
(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:

Ronda Poston

(Name of Person)

CAM OF ILLINOIS

(Firm/Company)

PO Box 87129

(Address)

South Roxana, IL 62087

(City/State and Zip Code)

For further information concerning this matter, please call:

Ronda Poston

(Name of Person)

at (618) 254-3855

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &
Certified Copy | <input type="checkbox"/> \$60 Filing Fee.
Certificate of Status &
Certified Copy |
|--|---|--|--|



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 26, 2011

CAM OF ILLINOIS, LLC
CAM, L.L.C.
300 DANIEL BOONE TRAIL
SOUTH ROXANA, IL 62087

SUBJECT: CAM OF ILLINOIS, LLC
Ref. Number: M97000000084

We have received your document for CAM OF ILLINOIS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a ALIEN BUSINESS ORGANIZATION, but your entity is a FOREIGN LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 211A00013075

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

CAM OF ILLINOIS, LLC

(Name of limited liability company)

ILLINOIS

(Jurisdiction of its organization)

M97000000084

(Florida Document Number)

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

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

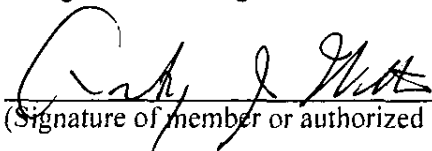
PO Box 87129

(Mailing address)

South Roxana, IL 62087

(City/State/Zip)

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



(Signature of member or authorized representative of a member)

Anthony J. Witte, President

(Typed or printed name of signee)

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11 JUN 16 AM 11:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00