M9700000522 Hunter Maclean

ATTORNEYS AT LAW

ATTURNETS AT LAW

HUNTER, MACLEAN, EXLEY & DUNN, P.C. POST OFFICE BOX 9848 SAVANNAH, GEORGIA 31412-0048

SAVANNAH OFFICE TELEPHONE:912.236.0261 E-MAIL: SPROVOST@HMED.COM

August 14, 2001

Office of the Florida Department of State Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

700094536777-001 ******25.00 ******25.00

Re: Coastal Crane Services, LLC, a Georgia limited liability company.

Dear Sir or Madam:

In accordance with the applicable provisions of the Florida Statutes, enclosed please find the following documents:

- I. Original and one conformed copy of the Application by Foreign limited liability company for Withdrawal of Authority to Transact Business in Florida; and
- 2. Our check in the amount of \$25.00 made payable to the Florida Department of State, representing payment of the filing fee.

Please file the Application at your earliest convenience and return the letter of acknowledgment to my attention.

Thank you for your assistance in this matter.

Sincerely,

Steve Provost

Corporate Paralegal

2001 AUG 15 PM 1:23
DIVINION OF CORPORATIONS

/slp

Enclosures

cc: Thomas S. Cullen, Esq.

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

COASTAL CRANE SERVICES, LLC (Name of limited liability company)
(ivame of infined habitity company)
GEORGIA
(Jurisdiction of its organization)
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.
26 East Bay Street (Mailing address)
Savannah, Georgia 31401
(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)
Frank Coslick (Typed or printed name of signee)
FIL ZOOI AUG 15 TALLAHASSE

Filing Fee: \$25.00