

M98 000000981

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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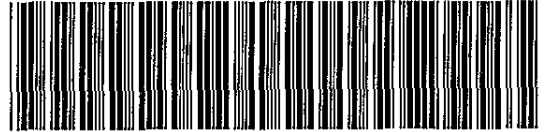
(Business Entity Name)

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05 APR 14 AM 11:25  
SEC OF STATE  
TALLAHASSEE, FLORIDA

FILED



**VIA FEDERAL EXPRESS**

April 13, 2005

Florida Department of State  
Division of Corporations  
Registration Section  
409 E. Gaines Street  
Tallahassee, FL 32399

Dear Sir/Madam:

**Re: Neweol (Delaware), L.L.C. – SOS ID No.: M9800000981– FEIN No.: 98-0371060**

Neweol (Delaware), L.L.C. ("the LLC") is hereby applying for a Withdrawal of a Foreign Limited Liability Company to transact business from the Florida Department of State. The LLC surrendered its license to do business in the State of Florida on January 03, 2002. In connection herewith, please find enclosed the Foreign Limited Liability Company Withdrawal of authority to transact business.

Should you have any questions or require additional information, please do not hesitate to contact Jacqueline Allen in Corporate Records. She can be reached at (416) 498-2774, fax (604) 456-6207 or via e-mail at [jacqueline.allen@alderwoods.com](mailto:jacqueline.allen@alderwoods.com). Your prompt attention to this matter is greatly appreciated.

Yours truly,

**NEWEOL (DELAWARE), L.L.C.**

Laurel J. Langford  
Secretary

Encl.

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STATE OF FLORIDA

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

NEWEOL (DELAWARE), L.L.C.  
(Name of limited liability company)

DELAWARE  
(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.

311 ELM STREET, SUITE 1000  
(Mailing address)

CINCINNATI OH 45202  
(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)

WILLIAM TOTTLER, MANAGER  
(Typed or printed name of signee)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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WILLIAM TOTTLE, MANAGER  
(Typed or printed name of signee)

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SEC. DEPT. OF STATE  
TALLAHASSEE, FLORIDA

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