M9900000187

(Re	questor's Name)	
(Ad	dress)	
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(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

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FLORIDA DEPARTMENT OF STATE Division of Corporations

July 11, 2007

DANA MEADOWS 3841 GREEN HILLS VILLAGE DRIVE SUITE 400 NASHVILLE, TN 37215

SUBJECT: PALM BAY ASSOCIATES, LLC

Ref. Number: M99000000187

We have received your document for PALM BAY ASSOCIATES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience

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

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 507A00044183



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 17, 2007

DANA MEADOWS *2ND MAILING* 3841 GREEN HILLS VILLAGE DRIVE SUITE 400 NASHVILLE, TN 37215

SUBJECT: PALM BAY ASSOCIATES, LLC

Ref. Number: M9900000187

We have received your document for PALM BAY ASSOCIATES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filled and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience

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) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 507A00044183



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 17, 2007

From:

DANA MEADOWS *2ND MAILING* 3841 GREEN HILLS VILLAGE DRIVE SUITE 400 NASHVILLE, TN 37215

SUBJECT: PALM BAY ASSOCIATES, LLC

Ref. Number: M9900000187

We have received your document for PALM BAY ASSOCIATES, LLG and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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If you have any questions concerning the filing of your document, please call (850) 245-6094.

への Agnes Lunt Document Specialist

Letter Number: 507A00044183

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

COVER LETTER

	stration Section sion of Corporations				
SUBJECT: _	Palm Bay Associates	-			
	(Name of Fore	ign Limited Liability (Company)		
Dear Sir or Ma	adam:				
The enclosed	withdrawal and fee(s) are submitted	for filing.			
Please return a	all correspondence concerning this r	natter to the following	:	•	
Dana Me	eadows				
	(Name of Person)		•		
Newton	Oldacre McDonald, L.L.	c.		SEC	2001
	. (Firm/Company)			A.K	333
3841 G	reen Hills Village Driv	e, Suite 400		IARY OI NSSEE,	1001 SEP 27 /
	(Address)			FLC	<i>></i>
Nashvi	lle, Tennessee 37215			AGE	A 10: 53
	(City/State and Zip Code)			
For further inf	ormation concerning this matter, pl	ease call:			
Dana M	eadows	615 (269-5444		
	(Name of Person)		Daytime Telephone Nu	mber)	_
STD	EET/COURIER ADDRESS:	MAII	INC ADDDECC.		
. .	stration Section	MAILING ADDRESS: Registration Section			
	ion of Corporations	Division of Corporations			
	on Building	P.O. Box 6327			
	Executive Center Circle hassee, Florida 32301	Tallaha	assee, Florida 32314		
Enclosed is a	check for the following amount:				
¥ \$25 Filing I	Fee \$\ \tag{\$30 \text{ Filing Fee & } \\ \text{Certificate of Status}	\$55 Filing Fee & Certified Copy	\$60 Filing Fee, Certificate of Sta	atus &	

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

Palm Bay Associates, LLC

(Typed or printed name of signee)

	(Name	e of limited liability company)				
Tennes	ssee					
(Jurisdiction of its organization)						
authority to tr	ransact business in this stat	te.	in Florida and surrenders its ed agent to accept service on ervice of process based on a business in Florida.			
cause of actio	on arising during the time i	t was authorized to transact l	ousiness in Florida.			
	250 Washington Street	t				
		(Mailing address)	IAS 2			
	Prattville, Alabama	36067 (City/State/Zip)	2001 SEP :			
	\sim	(City/State/Zip)	RY OF			
The limited lochange in its	liability company agrees mailing address.	to notify the Department o	of State-in-the future of any			
(Signature of	member or authorized rep	resentative of a member)				
17	onald, Co-Chief Manag	ŕ				

Filing Fee: \$25.00