## M9900000981

(Re	equestor's Name)	
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SECRETARY OF STATE
TALLAHASSEE, FLORIDI

T. CLINE

JUN 19 2008

**EXAMINER** 

M99-981

## · COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: TSO Oak Grove, LLC			
(Name of Fo	oreign Limited Liability	Company)	
Dear Sir or Madam:			
The enclosed withdrawal and fee(s) are submit	ted for filing.		
Please return all correspondence concerning the	is matter to the followin	g:	
Michelle Anderson			
(Name of Person)		_	
Arnall Golden Gregory		_	270°
(Firm/Company)			
171 17th Street NW, Suite 2100 (Address)		_	TALLAHASSEE FLORID
(Address)			日本 三
Atlanta, GA 30363		_	
(City/State and Zip Co	ode)		79
For further information concerning this matter,	please call:		
Michelle Anderson	at (404	, 870-5738	
(Name of Person)		Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Regis Divis P.O. 1	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, Florida 32314	
Enclosed is a check for the following amount	t:		-
\$25 Filing Fee \$30 Filing Fee & Certificate of Status	\$55 Filing Fee & Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy	

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

TSO Oak Grove, LLC
(Name of limited liability 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.
1401 Peachtree Street, Suite 400 (Mailing address)
(Mailing address)
and the
Atlanta, GA 30309 (City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
mi Sla
(Signature of member or authorized representative of a member)
Michael D. Golden
(Typed or printed name of signee)

Filing Fee: \$25.00