

**STATE OF FLORIDA
OFFICE OF THE COMPTROLLER
APPLICATION FOR REFUND**

Section 215.26, Florida Statutes, states in part: "Applications for refunds provided in this section shall be filed with the comptroller, except as otherwise provided herein, within 3 years after the right to such refund shall have accrued else such right shall be barred. Three years is generally interpreted as meaning three years from the date of payment into the State Treasury. The comptroller has delegated the authority to accept applications for refund to the unit of State government which initially collected the money."

Pursuant to the provisions of Rule 3A-44.020, Florida Administrative Code, and Section 215.26, Florida Statutes, or Section _____, Florida Statutes, I hereby apply for a refund of moneys I paid into the State treasury, which are subject to refund. The following information is submitted to substantiate the claim.

Name: DANIELLE LINDER EIN or SS#: 589-34-0066
Address: 3754 N.E. 209 TERR. (305) 932-6642
AVENTURA, FLA 33180

Amount: \$35.00 Date Paid 6 26 97

Reason for claim: Sent in the filing fee to resign as agent. Was not listed
as such.

P97000039124 LEGAL SALES ASSOCIATES, INC., CMustain/Amend

Certified true and correct this 31 day of July, 19 97.

Signature

Danielle Linder

* Must be completed if authority is other than Section 215.26, Florida Statutes.

For Agency Use Only	
Agency recommends approval of above claim and submits the following information to substantiate the claim:	Amount of recommended refund: <u>\$35.00</u>
The amount requested above was originally deposited into the State Treasury as a part of the funds deposited on State Treasurer's Receipt No. <u>01049 013</u> dated <u>6-26-97</u>	
Name of Account:	<u>45202130001453000000000010000</u>
Statutory Authority for Collection:	<u>607 0122</u>
It is requested that payment be made from the following account:	
NAME OF ACCOUNT:	<u>45202130001453000000022002000</u>
Certified true and correct this _____ day of _____, 19 _____	
Department of State, Division of Corporations (Agency)	(Authorized Signature and Title)

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

July 18, 1997

DANIELLE LINDER
3754 N.E. 209 TERRACE
NO. MIAMI BEACH, FL 33180

SUBJECT: LEGAL SALES ASSOCIATES, INC.
Ref. Number: P97000039124

We have received your document for LEGAL SALES ASSOCIATES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Enclosed is an application for refund.

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) 487-6916.

Carol Mustain
Corporate Specialist

Letter Number: 997A00036730