M00000001815

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

1818

Wrong form

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 DEC -7 PM 2:30

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CP Associates, L.L.C.
(Name of Foreign Limited Partnership or Limited Liability Limited Partnership)

The enclosed Notice of Cancellation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Robert Mayer
(Contact Person)

Christen Residential Trust
(Firm/Company)

345 N. Canal St. Ste 201
(Address)

Chicago IL 60606
(City, State and Zip Code)

For further information concerning this matter, please call:

Robert Mayer at (312) 454-1626
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ $52.50 Filing Fee ☒ $61.25 Filing Fee and Certificate of Status ☐ $105.00 Filing Fee and Certified Copy ☐ $113.75 Filing Fee, Certified Copy, and Certificate of Status

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 29, 2006

ROBERT MAYER
CHRISKEN RESIDENTIAL TRUST
345 N. CANAL STREET, STE. 201
CHICAGO, IL 60606

SUBJECT: CP ASSOCIATES, L.L.C.
Ref. Number: M00000001815

We have received your document for CP ASSOCIATES, L.L.C. and your check(s) totaling $61.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a foreign limited partnership, but your entity is a foreign limited liability company. Please complete and return the enclosed blank form(s).

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) 245-6853.

Leslie Sellers
Document Specialist

Letter Number: 606A00068675

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

CP Associates, LLC
(Name of limited liability company)

M00-1815 Illinois
(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.

345 N. Canal St. Ste 201
(Mailing address)

Chicago IL 60606
(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)

Robert Mayer
(Typed or printed name of signee)

Filing Fee: $25.00

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 DEC -7 PM 2:30