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SECRETARY OF STATE

## **COVER LETTER**

TO:

TO: Registration Se Division of Cor				
SUBJECT: New Acc	ess Communication			
	(Name of Forei	gn Limited Liability	Company)	
Dear Sir or Madam:				
The enclosed withdrawa	l and fee(s) are submitted	for filing.		
Please return all correspondent	ondence concerning this n	natter to the followir	og:	
Christine Gronew	/ald		_	
	(Name of Person)		-	
North Central Equ	iity		_	
	(Firm/Company)			0
60 South 6th Stre	et, Suite 2535		_	07 AUG -3 AH II: 18 SECKETARY OF STATE TALLAHASSEE, FLORID
	(Address)			当る
Minneapolis, MN				UG -3 AM II: 1
	(City/State and Zip Code)			E SI
For further information	concerning this matter, plo	ease call:		BE 8
Christine Gronew	ald	<sub>at (</sub> _612	, 465.0271	
(Name	of Person)		& Daytime Telephone Number)	
STREET/COU Registration Se Division of Cor Clifton Buildin 2661 Executive Tallahassee, Flo	porations g : Center Circle	Regi Divi P.O.	ILING ADDRESS: stration Section sion of Corporations Box 6327 shassee, Florida 32314	
Enclosed is a check for	the following amount:			
▼ \$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

(Name of limited liability company)
Minnesota
(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.
60 South 6th Street, Suite 2535 (Mailing address)
Minneapolis, MN 55402 (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)
Gregory Wilmes, Governor
(Typed or printed name of signee)
TAPE TO THE SECOND TO THE SECO

Filing Fee: \$25.00