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SECRETARY OF STATE
TALLAHASSEE FLORINA

O SIMMONS

COVER LETTER

			Section Corporations				
SUBJEC	~~~	Duke Fitness Centers, L.L.C.					
SOBALC	- 1 • .	_	(Name of For	reign Limited Liab	ility Con	npany)	
Dear Sir	or M	ladam:					
The encl	osed	withdra	wal and fee(s) are submitte	d for filing.			
Please re	aurn	ali corre	espondence concerning this	matter to the follo	wing:		
Sue La	arso	n					
			(Name of Person)				
Duke	Rea	Ity Co	rporation				
	•		(Firm/Company)	·			
3715 [Dav	inci C	ourt, Suite 300				
			(Address)				
Peach	itree	e Corn	ers, GA 30092				
			(City/State and Zip Cod	le)			
For furth	ner in	formatio	on concerning this matter, p	lease call:			
Sue Larson			770 at (, 6	38-2633		
		(Na	me of Person)		nde & Day	ytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahussee, Florida 32314				
Enclosed	d is a	check	for the following amount:				
2 \$25 F	iling	Fee	□ \$30 Filing Fee & Certificate of Status	S55 Filing Fee Certified Copy		S60 Filing Fee, Certificate of Status & Certified Copy	

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Duke Fitness Centers, L.L.C.	
(Name of limited liability company)	TO TO
Indiana	190 mg
(Jurisdiction of its organization)	55.73
June 17, 2003	
(Date registered with Florida Department of State)	
M0300002046	
(Florida Document Number)	
This limited liability company is withdrawing its certificate of authority in this sta	te.
(Signature of authorized representative)	_
Tammi D. Parker	
(Typed or printed name of signee)	-

Filing Fee: \$25.00