

M04000002987

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

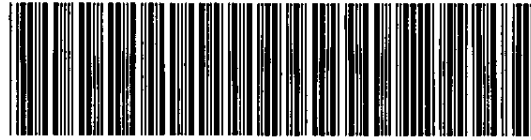
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SCI UNIVERSITY MARKETPLACE FUND S, LLC
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARVIN ALPERIN
(Name of Person)

(Firm/Company)

6501 MARYLAND DR.
(Address)

Los ANGELES, CA, 90048
(City/State and Zip Code)

For further information concerning this matter, please call:

MARVIN ALPERIN at (323) 931-7172
(Name of Person) (Area Code & Daytime 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
Tallahassee, 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

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

SC / UNIVERSITY MARKETPLACE FUND 8, LLC
(Name of limited liability company)

DELAWARE

(Jurisdiction of its organization)

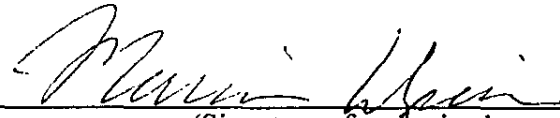
JULY 26, 2004

(Date registered with Florida Department of State)

M04000002987

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.



(Signature of authorized representative)

MARVIN ALPERIN

(Typed or printed name of signee)

FILED
2004 NOV 25 PM 12:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00