Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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: (850)617-6383

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone

: (850)222~1092

Fax Number

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LLC DISSOLUTION OR WITHDRAWAL **FANTASY HOOPS LLC**

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Corporate Filing Menu

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Fantasy Hoops LLC	
(Name	of Foreign Limited Liability Company)
Dear Sir or Madam:	
The enclosed withdrawal and fee(s) are su	bmitted for filing.
Please return all correspondence concerni	ng this matter to the following:
GABRIELA KORNZWEIG (Name of Person	
(14 mile of Laisen	,
NBC UNIVERSAL	
(Firm/Company)	
100 UNIVERSAL CITY PLAZ	<u>A</u>
(Addross)	
UNIVERSAL CITY, CA 91608	
(City/State and Z	ip Code)
For further information concerning this ma	atter, please call:
GABRIELA KORNZWEIG	s _{st} 818 777-8636_
(Name of Person)	(Ares Code & Daytime Telephone Number)
STREET/COURIER ADDRES Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclused is a check for the following am	ount:
\$25 Filing Fee \$\times \text{\$\text{S30 Filing Fee & Certificate of States}}\$	

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

. . . T

Fantasy Hoops LLC		
(Name of limited liability company)		
DELAWARE		
(Jurisdiction of its organization)		
This limited liability company is no longer transacting business in Florida and surreauthority to transact business in this state.	enders its	
This limited liability company revokes the authority of its registered agent to accept sits behalf and appoints the Department of State as its agent for service of process bacause of action arising during the time it was authorized to transact business in Florida.	ervice on ased on a	
C/O NBC UNIVERSAL, 100 UNIVERSAL CITY PLAZA - 1280-6 (Mailing address)	3	
UNIVERSAL CITY, CA 91608		
(City/State/Zip)		
The limited liability company agrees to notify the Department of State in the future change in its mailing address.	re of any	
Colle 1/X_	10 AUG SECKET FALLAHI	
(Signature of member or authorized representative of a member)	HASA -	T
GABRIELA KORNZWEIG, AUTHORIZED PERSON	man fragment	FILE
(Typed or printed name of signee)	77	O
	8: 2 ORII	
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Filing Fee: \$25.00