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IN JUL 21 P 4: (

COVER LETTER

, TO:

TO: Registration Division of	Section Corporations					
SUBJECT: MRG	Texas Partners, LLC	reign Limited Liability	Company)			
	(Name of Fe	reign Ellined Elability	Company)			
Dear Sir or Madam:						
The enclosed withdra	awal and fee(s) are submitt	ed for filing.				
Please return all corre	espondence concerning thi	s matter to the following	g:			
James Rossi			_			
	(Name of Person)					
20/20 Commur	nications, Inc					
-	(Firm/Company)		-	ALC SE		
				.AR	~	***
3575 Lone Sta	r Cir Ste 300			TAR ASS	7000 JUL 21	
	(Address)		-	∭© E		Ī
Fort Worth, TX			_	FUR	P li: 02	Ç
	(City/State and Zip Co	de)			02	
For further information	on concerning this matter,	please call:				
James Rossi		_{at (} 817	, 224-4209			
(Na	ume of Person)	· · · · · · · · · · · · · · · · · · ·	Daytime Telephone	Number)		
Registration Division of Clifton Buil	Corporations	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
	Florida 32301	ा वा।वा	iassee, i 10110a 323 l	7		
Enclosed is a check	for the following amount	:				
\$25 Filing Fee	\$30 Filing Fee & Certificate of Status	\$55 Filing Fee & Certified Copy	\$60 Filing Fe Certificate of	Status &		

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

MRG Texas Partners, LLC	
(Name of limited liability company)	
TEXAS	
(Jurisdiction of its organization)	
This limited liability company is no longer transacting business in Flauthority to transact business in this state.	orida and surrenders its
This limited liability company revokes the authority of its registered ago its behalf and appoints the Department of State as its agent for service cause of action arising during the time it was authorized to transact busing the time the time it was authorized to transact busing the time it was a	gent to accept service on e of process based on a less in Florida.
3575 Lone Star Cir Ste 300 (Mailing address)	
Fort Worth, TX 76177 (City/State/Zip)	
The limited liability company agrees to notify the Department of Stachange in its mailing address.	ate in the future of any
(Signature of member or authorized representative of a member) JAMES ROSSI, CONTROLLER	ZOOR JUL 2 SECRETAR) TALLAHASSE
(Typed or printed name of signee)	21 P 4: 0 RY OF STATE SEEE, FLORID

Filing Fee: \$25.00