

MIA 00000 2630

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BES APARTMENTS VIII, 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:

Dan Migacz  
(Name of Person)

Sherman Residential  
(Firm/Company)

500 Lake Cook Road, Suite 280  
(Address)

Deerfield, IL 60015  
(City/State and Zip Code)

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For further information concerning this matter, please call:

Dan Migacz at ( 847 ) 374-2708  
(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**

BES APARTMENTS VIII, LLC

\_\_\_\_\_  
(Name of limited liability company)

DE

\_\_\_\_\_  
(Jurisdiction of its organization)

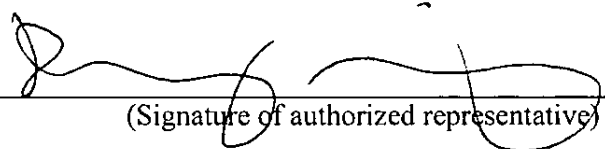
05/10/2012

\_\_\_\_\_  
(Date registered with Florida Department of State)

M12000002630

\_\_\_\_\_  
(Florida Document Number)

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



\_\_\_\_\_  
(Signature of authorized representative)

Daniel Migacz, Controller

\_\_\_\_\_  
(Typed or printed name of signee)

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TALLAHASSEE, FLORIDA  
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**Filing Fee: \$25.00**