(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Withdrawal

08/03/07--01009--007 \*\*35.00

FILED
2007 AUG -3 PM 4: 16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RJ8/9/01

### **COVER LETTER**

Division of Corporations
SUBJECT: Someset Association Management, Inc. (Name of Corporation)
DOCUMENT NUMBER: <u>F060000 2445</u>
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Tiffany Tsumpis
(Name of Person)
Hissoria
(Firm/Company)
S401 N. Central Expression Ste 300
Dallas, TK 7505 (City/State and Zip code)
For further information concerning this matter, please call:
Tiffary Teumsis at (214) 953-3009 (Name of Person) (Area Code & Daytime Telephone Number)

### **MAILING ADDRESS:**

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

## **STREET ADDRESS:**

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

Somerset Association Management, Inc (Name of Corporation)	
(Name of Corporation)	
FO6000002445 (Document Number of Corporation (if known)	
(Incorporated Under Laws of)  (Incorporated Under Laws of)  (Incorporation is no longer transacting business or conducting affairs within the State of Florida and he	TI
This corporation is no longer transacting business or conducting affairs within the State of Florida and he columnarily surrenders its authority to transact business or conduct affairs in Florida.	o ereby
This corporation revokes the authority of its registered agent in Florida to accept service on its behalf appoints the Department of State as its agent for service of process based on a cause of action arising during ime it was authorized to transact business or conduct affairs in Florida.	
The following is a current mailing address for the corporation:	
5401 N. Central Expressivay, Suite 300	
(Mailing Address)	
Dallas, TN 45205 (City/State/Zip)	
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the future of any change in its mailing address.	
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)  (Date)	_
Helen J. Eden (Typed or printed name of person signing)  (Title of person signing)	_

**FILING FEE \$35**