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DISSOLUTION OR WITHDRAWAL APF WO MANAGER 15, INC.

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EXAMINER

12/22/2011

COVER LETTER

TO: A	mendment Section		
Di	vision of Corporations		
SUBJEC"	T: APF WO Manager 15, Inc.		
		(Name of Corp	poration)
DOCUM	ENT NUMBER: F06000005131 ·		
The enclo	sed withdrawal application and fo	ee are submitte	d for filing.
	urn all correspondence concerning the following:	this	
1	Tara Nyack		
_		(Name of Pers	son)
5	itroock & Stroock & Lavan LLP		
_		(Firm/Compa	пу)
1	80 Maiden Lane		
_		(Address)	
N	New York, NY, 10038		
_	(Ci	ty/State and Zi	p code)
For furthe	r information concerning this matte	er, please call:	
Sena Schulz		at (212) 806-5884
	(Name of Person)		ea Code & Daytime Telephone Number)
	STREET ADDRESS:		MAILING ADDRESS:
	Amendment Section		Amendment Section
	Division of Corporations		Division of Corporations
	P.O. Box 6327		Clifton Building
	Tallahassee, FL 32314		2661 Executive Center Circle
			Tallahassee, FL 32301

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

APF WO Manager 15, Inc.

(Name of Corporation	**	
F06000005131		
(Document Number of Corporation	n (if known)	
D.		
Delaware (Incorporated Under Lew	/8 of)	
his corporation is no longer transacting business or conducting pluntarily surrenders its authority to transact business or conduc		reby
his corporation revokes the authority of its registered agent is oppoints the Department of State as its agent for service of processe it was authorized to transact business or conduct affairs in F	ss based on a cause of action arising during	and the
ne following is a current mailing address for the corporation:		
PO Box 5005		
-		MOEC 2
PO Box 5005		M DEC 27
PO Box 5005 (Mailing Address)		₹ %
PO Box 5005 (Mailing Address) New York, NY 10163 (City/ State /Zip)		₹ %
PO Box 5005 (Mailing Address) New York, NY 10163	ture of any change in its mailing address.	(3)
PO Box 5005 (Mailing Address) New York, NY 10163 (City/ State /Zip)	12/20/11	₹ %
PO Box 5005 (Mailing Address) New York, NY 10163 (City/ State /Zip)	• •	₹ %
PO Box 5005 (Mailing Address) New York, NY 10163 (City/ State /Zip) Re comporation agrees to notify the Department of State in the full composition of a director, president or other officer - (fin the bands of a city of a director, president or other officer - (fin the bands of a city of a c	12/20/11	₹ %

FILING FEE \$35