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(Re	questor's Name)		
(Ad	dress)		
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PICK-UP	☐ WAIT	MAIL	
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Withdrawa/ 02/13/15

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Post Services, Inc.	
	(Name of Corporation)
DOCUMENT NUMBER: F930000	
DOCUMENT NUMBER:	
The enclosed withdrawal application and fe	ee are submitted for filing.
Please return all correspondence concerning t matter to the following:	this
Sherry W. Cohen	
-	(Name of Person)
Post Apartment Hom	ies, L.P.
	(Firm/Company)
4401 Northside Park	way, Ste. 800
	(Address)
Atlanta, GA 30327	
(Cit	ty/State and Zip code)
For further information concerning this matte	er, please call:
Sherry W. Cohen	at (404 \ 846-5000
(Name of Person) Enclosed is a check for the amount:	(Area Code & Daytime Telephone Number)
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & \$52.50 Filing Fee, Certified Copy Certificate of Status & Certified (Additional copy is Enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations 2661 Executive Center Circle

Tallahassee, FL. 32301

Tallahassee, FL.32314

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

(Name of Corporation)

海.

Post Services, Inc.

See Attached

(Typed or printed name of person signing)

(Document Number of Corporation	on (if known)	
Georgia		
(Incorporated Under Law	vs of)	
This corporation is no longer transacting business or conducting voluntarily surrenders its authority to transact business or conducting		lorida and hereby
This corporation revokes the authority of its registered agent appoints the Department of State as its agent for service of prothe time it was authorized to transact business or conduct affairs	cess based on a cause of acti	
The following is a current mailing address for the corporation:		Sept. 51
4401 Northside Parkway, Ste	e. 800	THE THE
(Mailing Address)	-	8-3 FILE
Atlanta, GA 30327		PH 3:
(City/ State /Zip)		32
The corporation agrees to notify the Department of State in the f	future of any change in its ma	iling address.
See Attached	1/30/15	
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)	

FILING FEE \$35

See Attached

(Title of person signing)

Signature Page

Application by Foreign Corporation for Withdrawal of Authority to Transact **Business or Conduct Affairs in Florida**

Authorized Representative

POST SERVICES, LLC, a Georgia limited liability company, successor by conversion to Post Services, Inc., a Georgia corporation

By: Post Apartment Homes, L.P., a Georgia

limited partnership

Post GP Holdings, Inc., a Georgia By:

corporation, its sole general partner

Name: Sherry W. Cohen
Title: Executive Vice President