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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Tallahassee Cabot Ladge, Inc. (Name of Corporation)
(Name of Corporation)
DOCUMENT NUMBER: F9800001117
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Michael J. Hast (Name of Person)
(Name of Person)
MMI Hotel Group (Firm/Company)
(Address) Flowood, MS 39232 (City/State and Zip code)
(Address)
Flowood, MS 39232
(City/State and Zip code)
For further information concerning this matter, please call:
(Name of Person) at (601) 936-3666 (Area Code & Daytime Telephone Number)
(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



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

March 9, 2011

MICHAEL J. HART MMI HOTEL GROUP 1000 RED FERN PLACE FLOWOOD, MS 39232

SUBJECT: TALLAHASSEE CABOT LODGE, INC.

Ref. Number: F98000001117

We have received your document for TALLAHASSEE CABOT LODGE, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Articles of Dissolution to dissolve a Florida domestic corporation have been submitted in error. A withdrawal application must be filed to withdraw the authority of a foreign corporation in Florida.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6908.

Letter Number: 311A00005741

Sylvia Gilbert

Regulatory Specialist II

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

P 73 4

Tallahassee Cabot Codge, Inc.
(Name of Corporation)
F 98 00 000 1117 PS B COrporation (if known)
(Document Number of Corporation (if known) (Document Number of Corporation (if known) ARR ARR ARR ARR ARR ARR ARR A
(Incorporated Under Laws of)
This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.
This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.
The following is a current mailing address for the corporation:
1000 Red Fear Place (Mailing Address)
(Mailing Address)
Flowood, MS 39232 (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 fiftuciary, by that fiduciary) (Date)
(Typed or printed name of person signing) (Title of person signing)

FILING FEE \$35