

F99000005306

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Withdrawn

RECEIVED  
SECRETARY OF STATE  
13 DEC 31 AM 10:58

FILED  
2013 DEC 31 PM 1:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. 12/14



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 945136 4379392

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE : December 30, 2013

ORDER TIME : 10:0 AM

ORDER NO. : 945136-055

CUSTOMER NO: 4379392

FOREIGN FILINGS

NAME: CALPINE CCFC GP, INC.

XX CORPORATE  
       LIMITED PARTNERSHIP  
       LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF STATUS

CONTACT PERSON: Susie Knight - EXT# 52956

EXAMINER: \_\_\_\_\_

FILED  
2013 DEC 31 PM 1:43  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

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

Calpine CCFC GP, Inc.

\_\_\_\_\_  
(Name of Corporation)

F99000005306

\_\_\_\_\_  
(Document Number of Corporation (if known))

Delaware

\_\_\_\_\_  
(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:

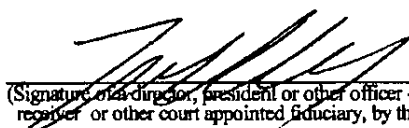
717 Texas Avenue, Suite 1000

\_\_\_\_\_  
(Mailing Address)

Houston, TX 77002

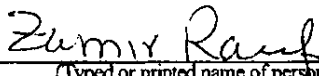
\_\_\_\_\_  
(City/ State /Zip)

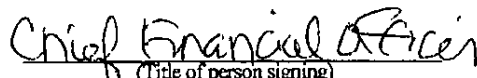
The corporation agrees to notify the Department of State in the future of any change in its mailing address.

  
\_\_\_\_\_  
(Signature of director, president or other officer - if in the hands of a  
receiver or other court appointed fiduciary, by that fiduciary)

12/31/2013

\_\_\_\_\_  
(Date)

  
\_\_\_\_\_  
(Typed or printed name of person signing)

  
\_\_\_\_\_  
(Title of person signing)

**FILING FEE \$35**