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(Requestor's Name)	ARY OF STATE ASSEE, FLANE,
(Address)	700043694537
(Address) (City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	01/19/0501053007 **25 .00
(Business Entity Name) (Document Number)	
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Prudential Investment Management

Prudential Real Estate Investors, TMW Property Funds (USA) Two Ravinia Drive, Suite 400, Atlanta GA 30346-2104 Tel 770 48 3000 Fax 770 411 3550

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

VIA OVERNIGHT DELIVERY

January 18, 2005

Registration Section
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

RE:

USPM Delaney, LLC

Document No. M0000000570

Dear Sir or Madam:

Enclosed please find an Application by Foreign Limited Liability Company for Withdrawal of Authority to Transact Business in Florida for the above-referenced entity. Since this entity is no longer conducting business in Florida, we wish to withdraw effective immediately. I have also included a check in the amount of \$25.00 in payment of the required filing fee.

Thank you for your assistance in this matter. Should you require additional information, please feel free to contact me at 770-481-3561.

Sincerely,

Rosemary Van Arsdale for

John A. Rose, Vice President

:rva

Enclosures

cc: R. Hayes, CT Corporation System

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

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SECRETARY OF STATE TALLAHASSEE, FLORIDA
USPM Delaney, LLC
(Name of limited liability company)
State of Georgia
(Jurisdiction of its organization)
This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.
This limited liability company revokes the authority of its registered agent 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 in Florida.
Two Ravinia Drive, Suite 400
(Mailing address)
Atlanta, Georgia 30346-2104
(City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
(Signature of member or authorized representative of a member)
_ John A. Rose, Vice President
(Typed or printed name of signee)

Filing Fee: \$25.00