

M00000000795

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

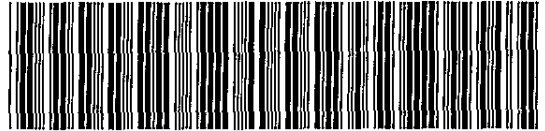
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700037360417

FILED
04 MAY 27 PM 2:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
04 MAY 27 PM 10:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 687593 4344517

AUTHORIZATION : *Patricia Pizut*

COST LIMIT : \$ 25.00

ORDER DATE : May 26, 2004

ORDER TIME : 9:54 AM

ORDER NO. : 687593-010

CUSTOMER NO: 4344517

CUSTOMER: Kathy Snyder
Centex Corporation
Po Box 19000

Dallas, TX 75219-9000

FILED
04 MAY 27 PM 2:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FOREIGN FILINGS

NAME: CENTEX INDUSTRIAL GENERAL
PARTNER, LLC

XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Haddan - EXT# 2955

EXAMINER: _____

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

FILED
04 MAY 27 PM 2:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Centex Industrial General Partner, LLC
(Name of limited liability company)

Delaware
(Jurisdiction of its organization)

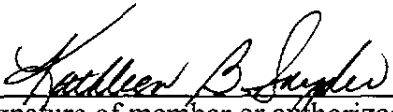
This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.

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.

c/o Raymond G. Smerge, P. O. Box 199000
(Mailing address)

Dallas, TX 75219-9000
(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)

Kathleen B. Snyder, Authorized Representative
(Typed or printed name of signee)

Filing Fee: \$25.00