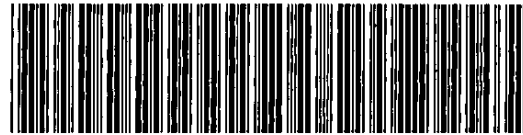


M00000001874



100081813301

11/17/06--01058--004 \*\*30.00

(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:  
*SBM*  
*to draw*

Office Use Only

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06 NOV 20 AM 9:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

James D. Palermo  
General Counsel and Senior Vice President



November 10, 2006

Florida Department of State  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

Re: Ice Cream Ventures, LLC - Withdrawal  
M01000001874

Gentlemen:

Enclosed please find executed Application by Foreign Limited Liability Company for Withdrawal of Authority to Transact Business in Florida for Ice Cream Ventures, LLC, together with a check, in the amount of \$30.00, made payable to the Florida Department of State, in payment for the required filing fee for the Application and for the return to my attention of a Certificate of Status..

Please forward your acknowledgement letter to my attention in the enclosed self addressed stamped envelope.

Thank you for your cooperation.

Very truly yours,

A handwritten signature in black ink, appearing to be 'JDP', is written over a horizontal line. Below the signature, the name 'JAMES D. PALERMO' is printed in a bold, sans-serif font.

JAMES D. PALERMO

JDP/ms  
Enclosures

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Ice Cream Ventures, LLC  
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

James D. Palermo, General Counsel  
(Name of Person)

DeBartolo Holdings, LLC  
(Firm/Company)

15436 North Florida Avenue, Suite 200  
(Address)

Tampa, Florida 33613  
(City/State and Zip Code)

For further information concerning this matter, please call:

James D. Palermo at ( 813 ) 908-8400  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

- \$25 Filing Fee
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy

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

Ice Cream Ventures, LLC  
(Name of limited liability company)

Delaware  
(Jurisdiction of its organization)

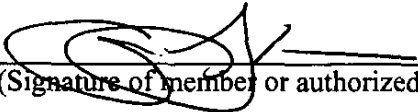
This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.

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.

15436 North Florida Avenue, Suite 200  
(Mailing address)

Tampa, Florida 33613  
(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)

James D. Palermo  
(Typed or printed name of signee)

**FILED**  
06 NOV 20 AM 9:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Filing Fee: \$25.00**