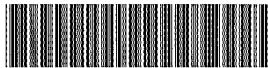
With not Diss form DDU71

(Requestor's Name)	
(Address)	3000619
(Address)	3000019
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	12/09/050103
(Business Entity Name)	
M- 2284 (Document Number)	
Certified Copies Certificates of Status	
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 14, 2005

FELICIA CHICHESTER TCG LAKELAND ASSOCIATES, LLC 8484 GEORGIA AVENUE, SUITE 620 SILVER SPRING, MD 20910

SUBJECT: TCG LAKELAND ASSOCIATES, LLC

Ref. Number: M00000002284

We have received your document for TCG LAKELAND ASSOCIATES, LLC and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must complete the attached Withdrawal form for this Foreign Limited Liability Company, the form submitted is to dissolve a Florida Limited Liability Company.

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) 245-6967.

Letter Number: 005A00071931

Michelle Hodges Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

## COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: TCG LAWELAND ASSOCIATES 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:
FEITCIA CHTCHESTER (Name of Person)
TCG DEVELOPMENT SERVICES LLC (Firm/Company)
8484 GEORGIA AVE STE 620
STIVER SPRTUG MD ZOGIO (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) (Arca 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 Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
\$25 Filing Fee \$\sum \\$30 Filing Fee & \sum \\$55 Filing Fee & \sum \\$60 Filing Fee,  Certificate of Status Certified Copy Certificate of Status & Certified Copy  FOR AUEAD?  COURTED

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

4 - 3

TCG LAKELAND ASSOCIATES LLC (Name of limited liability company)		<u> </u>	
DELAWARE (Jurisdiction of its organization)	<u></u> _		ı
This limited liability company is no longer transacting business in Florida and s authority to transact business in this state.	urrende	rs its	
This limited liability company revokes the authority of its registered agent to access the behalf and appoints the Department of State as its agent for service of process cause of action arising during the time it was authorized to transact business in Florida.	pt servi s based da.	ce on on a	
8484 GEORGIA AVENUE SUTTE 6000 (Mailing address)	2		
STIVER SPRING MD 20910	<u>.                                    </u>		
The limited liability company agrees to notify the Department of State in the finding address.	uture o	f any	
(Signature of member or authorized representative of a member)	TAC	06	
TATME BORDENAVE  (Typed or printed name of signce)	LAHASJE	FEB 10 A	To the state of th
	FLURIDA	4 ID: 13	-

Filing Fee: \$25.00