

M020000000307

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

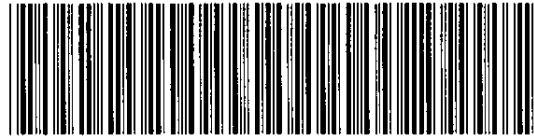
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



200159842952

RECEIVED  
09 AUG 24 AM 10:44  
FLORIDA SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

B. KOHR  
AUG 24 2009  
EXAMINER

FILED  
09 AUG 24 PM 1:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 104147 4360443

AUTHORIZATION : *[Signature]*

COST LIMIT : \$ 25.00

ORDER DATE : August 21, 2009

ORDER TIME : 8:50 AM

ORDER NO. : 104147-015

CUSTOMER NO: 4360443

FILED  
09 AUG 24 PM 1:45  
TALLAHASSEE, FLORIDA

FOREIGN FILINGS

NAME: CLEARWATER MALL, LLC

☐ CORPORATE  
☐ LIMITED PARTNERSHIP  
☒ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY  
☒ PLAIN STAMPED COPY  
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Susie Knight - EXT# 2956

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

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

FILED  
09 AUG 24 PM 1:45  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

Clearwater Mall, 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.

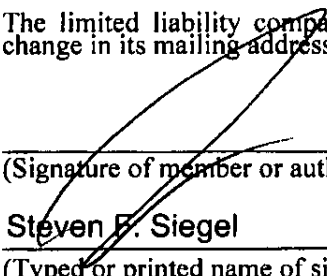
Centro Properties Group, 420 Lexington Avenue, 7th floor

(Mailing address)

New York, NY 10170

(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)

Steven F. Siegel

(Typed or printed name of signee)

**Filing Fee: \$25.00**