

M03060000226

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

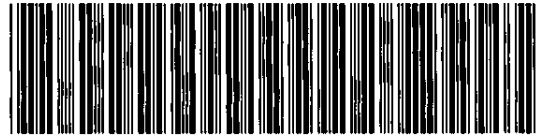
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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 661212 4348715

AUTHORIZATION : *[Signature]*

COST LIMIT : \$ 25.00

ORDER DATE : December 13, 2006

ORDER TIME : 10:08 AM

ORDER NO. : 661212-045

CUSTOMER NO: 4348715

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TALLAHASSEE, FLORIDA

FOREIGN FILINGS

NAME: S.E. RESIDENTIAL SKY PINES LLC

 CORPORATE
 LIMITED PARTNERSHIP
XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF STATUS

CONTACT PERSON: Amanda Haddan - EXT# 2955

EXAMINER: _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

06 DEC 14 PM 2:49

December 14, 2006

AMANDA HADDAN
CSC
TALLAHASSEE, FL

RESUBMIT

Please give original
submission date as file

SUBJECT: S.E. RESIDENTIAL SKY PINES ASSOCIATES LLC
Ref. Number: M03000000226

We have received your document for S.E. RESIDENTIAL SKY PINES ASSOCIATES LLC and the authorization to debit your account in the amount of \$25.00. However, the document has not been filed and is being returned for the following:

Is the name of this company supposed to be S.E. RESIDENTIAL SKY PINES ASSOCIATES LLC. This is the only similar name we show on our records.

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) 245-6914.

Buck Kohr
Document Specialist

Letter Number: 406A00071084

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TALLAHASSEE, FLORIDA

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

S.E. Residential Sky Pines Associates 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.

825 Third Avenue, 36th Floor

(Mailing address)

New York, New York 10022

(City/State/Zip)

The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.

Wayne M. Lopkin
(Signature of member or authorized representative of a member)

Wayne M. Lopkin

(Typed or printed name of signee)

Filing Fee: \$25.00

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