

1103000000376

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2012 DEC 14 AM 8:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

DEC 27 2012

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 459644 4319480

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : December 14, 2012

ORDER TIME : 1:18 PM

ORDER NO. : 459644-010

CUSTOMER NO: 4319480

FOREIGN FILINGS

NAME: COOPERATIVE EQUITIES IV 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# 52956

EXAMINER: _____

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

459641-10

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TALLAHASSEE, FLORIDA

December 17, 2012

CSC
ATTN: SUSIE KNIGHT

SUBJECT: COOPERATIVE EQUITIES IV LLC
Ref. Number: M03000000376

RESUBMIT
Please give original
submission date as file date.

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

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6051.

Joey Bryan
Regulatory Specialist II

Letter Number: 512A00029668

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TALLAHASSEE, FLORIDA

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

COOPERATIVE EQUITIES IV LLC

(Name of limited liability company)

NY

(Jurisdiction of its organization)

M03000000376

(Florida Document Number)

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.

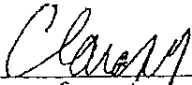
55 Fifth Avenue, 15th Fl

(Mailing address)

NY, NY 10003

(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)

Clara Diaz

(Typed or printed name of signee)

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TALLAHASSEE, FLORIDA

Filing Fee: \$25.00