

# M0300000681

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5368

2011 JUL -8 AM 10:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**LLC DISSOLUTION OR WITHDRAWAL  
CPRE-1 ALD, L.L.C.**

Certificate of Status	0
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C. LEWIS

JUL 11 2011

EXAMINER

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CPRE-I ALD, L.L.C.  
(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:

Mary Getting  
(Name of Person)

Archan Group, L.P.  
(Firm/Company)

6011 Connection Dr.  
(Address)

Irving TX 75039  
(City/State and Zip Code)

For further information concerning this matter, please call:

Sara Frederick at (214) 932-3685  
(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:

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|--|---|--|--|

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

2011 JUL -8 AM 10:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CPRE-1 ALD, L.L.C.

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

M03000000681

(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.

c/o Office of the General Counsel, Archon Group, LP, 6011 Connection Drive

(Mailing address)

Irving, TX 75039

(City/State/Zip)

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

*Ron K. Burger*

(Signature of member or authorized representative of a member)

Ron K. Burger, Asst. Secretary and duly authorized on behalf of Member

(Typed or printed name of signee)

Filing Fee: \$25.00