M03000001614

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	TIAW [MAIL
(Bu	usiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
		,
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Office Use Only



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OGAPR 27 PM 1:56
SLUBE DAGE US STATE
AND A SEE FLORIDA

OF APR 27 MIII: 53

ROLLWANDARCO AD MOISIAID



a Wolters Kluwer business

CT1203 Governors Square Blvd. Tallahassee, FL 32301-2960

850 222 1092 tel 850 222 7615 fax www.ctlegalsolutions.com

April 26, 2006

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re:

Order #: 6626823 SO

Customer Reference 1:

NONE

Customer Reference 2:

Dear Department of State, Florida:

Please obtain the following:

VAMENS Court Village Entities (UC)
Cancellation
Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Dew: Wilson

Fulfillment Specialist

Page I of 1

COVER LETTER

	ion Section of Corporations		
SUBJECT: USA	COURT VILLAGE 9, LLC	3	
		oreign Limited Liability	(Company)
Dear Sir or Madar	n:		
The enclosed with	drawal and fee(s) are submi	tted for filing.	
Please return all co	orrespondence concerning th	nis matter to the following	ng:
ANITA ERHARE)		
	(Name of Person)		
U.S. ADVISOR, L	LC .		
	(Firm/Company)		- · · · · <u>- · · · · · · · · · · · · · · </u>
FIVE FINANCIA	L PLAZA, SUITE 205		
	(Address)		
NAPA, CA 94558			
	(City/State and Zip Co	ode)	_
For further informa	tion concerning this matter,	please call:	
anita erhard		at (253-9953
Q	Name of Person)	(Area Code d	t Daytime Telephone Number)
	COURIER ADDRESS:		LING ADDRESS:
Registration of Division of Contract of Co	n section f Corporations	Registration Section Division of Corporations	
Clifton Bu	-	P.O. Box 6327	
	utive Center Circle e, Florida 32301	Tallai	nassee, Florida 32314
Enclosed is a checl	k for the following amount	t:	
\$25 Filing Fee	\$30 Filing Fee & Certificate of Status	\$55 Filing Fee & Certified Copy	S60 Filing Fee, Certificate of Status & Certified Copy

FILED 06 APR 27 PM 1: 56 SECREPARY OF STATE FALLAHASSEE, FLORIDA

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

	(Name of limited liability company)	·	
DELAWARE	(CANCELLED IN DELAWARE ON 02/09/06)		
	(Jurisdiction of its organization)		
This limited li authority to tra	iability company is no longer transacting business in Flounsact business in this state.	rida and surrenders its	
This limited li- its behalf and cause of action	ability company revokes the authority of its registered age appoints the Department of State as its agent for service arising during the time it was authorized to transact busine	nt to accept service on of process based on a ss in Florida.	
FIV	E FINANCIAL PLAZA, SUITE 205		
	(Mailing address)		
NAP	A, CA 94558		
	(City/State/Zip)		3 16 (36)
The limited lie change in its m	ability company agrees to notify the Department of State ailing address.	e in the future of any	
<u> </u>			7
(Signature of m	nember or authorized representative of a member)		SE
ANITA ERHARI	<u> </u>		<u> </u>
(Typed or print	ed name of signee)		ASA ASA
			SEE~
			STA OR
		OS A	10A 56
		ARE BR	
		27	
			,
	Filing Fee: \$25.00		