

M03000003611

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

M03-3611

(Document Number)

Certified Copies _____

Certificates of Status _____

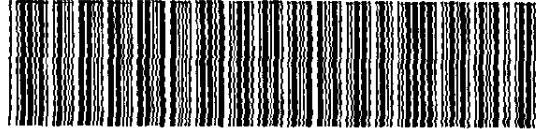
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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 940264 4304937

AUTHORIZATION : *[Signature]*

COST LIMIT : \$ 25.00

ORDER DATE : March 24, 2006

ORDER TIME : 12:49 PM

ORDER NO. : 940264-020

CUSTOMER NO: 4304937

FOREIGN FILINGS

NAME: PRIM SUMMER COVE 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: Amanda Haddan - EXT# 2955

EXAMINER: _____

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06 MAR 24 PM 2:43
DIVISION OF CORPORATION

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

PRIM SUMMER COVE 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.

28 State Street, Tenth Floor

(Mailing address)

Boston, MA 02109

(City/State/Zip)

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

Michael Ruane
(Signature of member or authorized representative of a member)

Michael A. Ruane, Authorized Signatory

(Typed or printed name of signee)

Filing Fee: \$25.00

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TALLAHASSEE FLORIDA