M04000000322

(Req	uestor's Name)	·
(Addi	ress)	
(Add	ress)	
(City/	/State/Zip/Phon	e#)
PICK-UP	WAIT	MAIL.
(Busi	iness Entity Nar	me)
(Doc	ument Number)	
Certified Copies	Certificate	s of Status
Special Instructions to F	iling Officer:	





600069898206

04/27/06--01032--019 **475.00

FILED

06 APR 27 PM 1: 38

SECNETARY OF STATE ALLAMASSEE FLORIDA

06 APR 27 PH 12: 09
DIVISION OF CORFORATION

RECEIVED



CT 1203 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 #: 6626628 SO

Customer Reference 1: NONE

Customer Reference 2:

Dear Department of State, Florida:

Please obtain the following:

VARIOUS HAMPTON, Entitles (CLC)
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,

Connic Bryan Fulfillment Specialist 06 APR 27 PM 1:38
SECKELARY OF STATE

COVER LETTER

	of Corporations			
SUBJECT: USA	HAMPTONS 9, LLC			
	(Name of Fo	reign Limited Liability	Company)	
Dear Sir or Madan	a:			
The enclosed with	drawal and fee(s) are submitt	ed for filing.		Į.
Please return ail co	arespondence concerning this	s matter to the following	g:	ALLAND
ANITA ERHARD				
	(Name of Person)			
U.S. ADVISOR, L				
	(Firm/Company)			
FIVE FINANCIAL	PLAZA, SUITE 205	·	_	
	(Address)			
NAPA, CA 94558				
	(City/State and Zip Coo	le)		
For further informa	tion concerning this matter, p	please call:		
ANITA ERHARD		at (707	253-9953	
Q	Name of Person)	(Area Code &	Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallshassee, Florida 32301		Regist Divisi P.O. E	ING ADDRESS: tration Section on of Corporations Jox 6327 assec, Plorida 32314	
	k for the following amount:	•		
\$25 Filing Fee	S30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy	

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

USA HAMPTONS 9, L	ıc
	(Name of limited liability company)
DELAWARE (C.	ANCELLED IN DELAWARE ON 02/09/06)
	(Jurisdiction of its organization)
This limited liability authority to transact	y company is no longer transacting business in Florida and surrenders its business in this state.
This limited liability its behalf and appoint cause of action arising	company revokes the authority of its registered agent to accept service on nts the Department of State as its agent for service of process based on a g during the time it was authorized to transact business in Florida.
FIVE FINA	NCIAL PLAZA, SUITE 205
	(Mailing address)
NAPA, CA	94358
	(City/State/Zip)
The limited liability change in its mailing	company agrees to notify the Department of State in the future of any address.
anita	Elhard
(Signature of member	or authorized representative of a member)
ANITA ERHARD	
(Typed or printed nan	ne of signee)
	Pa c

Filing Fee: \$25.00