## M0400000508

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DIVISION OF CORPORATIONS
06 APR 24 PM 4: 20

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Ashley Capital, LLC		
(Name of	f Foreign Limited Liability Company)	
Dear Sir or Madam:		
The enclosed withdrawal and fee(s) are sub-	mitted for filing.	
Please return all correspondence concerning	this matter to the following:	
Wendy Mooers		<b>6</b> DIVISE
(Name of Person)		SECRETARY OF STATIONS DIVISION OF APR 24 PM 4: 20
		24 24
Ashley Capital, LLC		3 3990
(Firm/Company)		= ==
9810 S. Dorchester Ave.		20
(Address)		
Chicago, IL 60628 (City/State and Zip	(Coda)	
(Chy/State and Zip	Codey	
For further information concerning this matt	er, please call:	
Wendy Mooers	et 773 221-1234	
(Name of Person)	at ( 773 ) 221-1234 (Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section		
Division of Corporations	Registration Section Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the following amou	unt:	
\$25 Filing Fee \$30 Filing Fee & Certificate of State	✓ \$55 Filing Fee & \$60 Filing Fee, us Certified Copy Certificate of Status & Certified Copy	

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

Ashley Capital, LLC
(Name of limited liability company)
Illinois
(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.
9810 S. Dorchester Ave. (Mailing address)
Chicago, IL 60628 (City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its maining address.
(Signature of member or puthorized representative of a member)
(Typed or printed name of signee)  OF APR 24 PM 4: 20

Filing Fee: \$25.00