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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nar	me)
· (Do	ocument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	_ Certificates	s of Status

Special Instructions to Filing Officer:

A. LUNT

APR 29 2008

EXAMINER

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SECRETARY OF STATE ALLAHASSEF, FI DOM

FILED

Writer's Direct Line: (614) 628-0840 Writer's E-Mail Address: peg@cpmlaw.com

April 22, 2008

Registration Section
Division of Corporations
Florida Secretary of State
P.O. Box 6327
Tallahassee, Florida 32314

Re: Florida Withdrawal of Canal C Partners Southeast LLC

CARPOFSI CARPOFSI CARPOFSI FILED

Dear Sir or Madam:

Enclosed herewith are documents submitted to file a withdrawal of authority to transact business in Florida on behalf of our client, Capital City Partners Southeast Inc., an Ohio domestic limited liability company.

- Florida Division of Corporations Cover Letter
- An original and one conformed copy of an Application by Foreign Limited Liability Company for Withdrawal of Authority to Transact Business
- Our check in the amount of \$130.00 for the filing fee and the return of a certificate of status

A postage paid return envelope is provided for return of a date-stamped copy of the Application and the requested Certificate of Status. Thank you.

Very truly yours,

CARLILE PATCHEN & MURPHY LLP Jan E. Juisu

Pam E. Geiser

OSBA Certified Paralegal

PEG/PEG/780509.1 025382.001 Enclosures

cc: David S. Jackson

COVER LETTER

TO:

	on Section of Corporations			
SUBJECT:	Capital City Partners (Name of Fo	Southeast, LLC reign Limited Liability (Company)	
Dear Sir or Madan	n:			
The enclosed with	drawal and fee(s) are submitte	ed for filing.		
Please return all co	orrespondence concerning this	s matter to the following	:	
Pa	ım E. Geiser, Paralega (Name of Person)	<u> </u>		
	(::and ::10:an,		• ,	4
	Carlile Patchen & Murp	hy LLP	·	ZECI SECI
	(Firm/Company)			APR HAZ
3	66 East Broad Street (Address)			2008 APR 28 P 4: 32 SECRETARY OF STATE ALLAHASSEE, FLORIDA
C	Columbus, Ohio 43215			: 32 ATE RIDA
	(City/State and Zip Co			
For further inform	ation concerning this matter,	please call:		
Pam E.	Geiser	at (614	228-6135	
((Name of Person)	(Area Code &	Daytime Telephone Nu	mber)
Registrat Division Clifton B 2661 Exe	T/COURIER ADDRESS: ion Section of Corporations wilding ecutive Center Circle see, Florida 32301	Regist Division P.O. B	JNG ADDRESS: ration Section on of Corporations sox 6327 assee, Florida 32314	
Enclosed is a che	ck for the following amount	:		
\$25 Filing Fee	\$30 Filing Fee & Certificate of Status	\$55 Filing Fee & Certified Copy	\$60 Filing Fee, Certificate of Sta	atus &

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

CAPITAL CITY PARTNERS SOUTHEAST, LLC	
(Name of limited liability company)	
STATE OF OHIO	
(Jurisdiction of its organization)	
This limited liability company is no longer transacting business in Florida and surrende authority to transact business in this state.	ers its
This limited liability company revokes the authority of its registered agent to accept servits behalf and appoints the Department of State as its agent for service of process based cause of action arising during the time it was authorized to transact business in Flexiba.	ice on I on a
1335 Dublin Road, Suite 122-D (Mailing address)	
Columbus, Ohio 43215 (City/State/Zip) Columbus, Ohio 43215 (City/State/Zip)	Ö
The limited liability company agrees to notify the Department of State in the future of change in its mailing address.	of any
(Signature of member or authorized representative of a member)	
Toggh A. Smith - Maraging Hember (Typed or printed name of signee)	

Filing Fee: \$25.00