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SECRETARY OF STATE OIVISION OF CORPORATIONS

J. BRYAN

JAN 1 3 2009

**EXAMINER** 

## COVER LETTER

TO:

TO: Registration Sec Division of Corp				
SUBJECT: Colony				
	(Name of For	reign Limited Liability (	Company)	
Dear Sir or Madam:				
The enclosed withdrawal	and fee(s) are submitte	ed for filing.		
Please return all correspo	ndence concerning this	matter to the following	:	
Linda Bodenstein				
	(Name of Person)			
Colony Advisors,	LLC			
	(Firm/Company)			
1999 Avenue of th	ne Stars, Suite 12	200		
	(Address)			
Los Angeles, CA				
	(City/State and Zip Coo	le)		
For further information co	oncerning this matter, p	olease call:		
Linda Bodenstein		at (_310	552-7180	
(Name o	of Person)	(Area Code &	Daytime Telephone Number)	
STREET/COU Registration Sec Division of Corp Clifton Building 2661 Executive	porations	Registration Section Division of Corporations P.O. Box 6327 Circle Tallahassee, Florida 32314		
Tallahassee, Flo				
Enclosed is a check for t	the following amount	:		
\$25 Filing Fee	\$30 Filing Fee & Certificate of Status	\$55 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

Colony Mayfair House, 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 the 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.
1999 Avenue of the Stars, Suite 1200 (Mailing address)
Los Angeles, CA 90067 (City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.  Signature of member or authorized representative of a member)  Joy Mallory (Typed or printed name of signee)

Filing Fee: \$25.00