MO400003032

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(,					
(Document Number)					
(Booding)					
Contification of Status					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
Λ					
40%	ŀ				
Lt. 1					

Office Use Only



900082283239

12/06/05--01057--003 **30.00

SECRETARY OF STATE FALLAHASSEE, FLORIDA

OF OFF - S. AM III.

COVER LETTER

TO:	Registration Division of	Section Corporations			,
SUBJE	CT:	The Ep	pitome Group,	LLC	
		(Name of Fo	reign Limited Lial	oility (Company)
Dear Si	ir or Madam:				
The end	closed withdra	awal and fee(s) are submitte	ed for filing.		
Please	return all corr	espondence concerning this	s matter to the foll	owing	:
		Philip S. Lotane			
		(Name of Person)			
	Ve	enture Advisors Legal	, P.C.		
		(Firm/Company)			
		74 School Street			
		(Address)			
		Carlisle, MA 01741			
		(City/State and Zip Co	de)		
For fur	ther informati	on concerning this matter,	please call:		
	Phi	ilip S. Lotane	at (978		287-4111
	(N	ame of Person)		ode &	Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		1	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclos	ed is a check	for the following amount	:		
□\$ 25	Filing Fee	\$30 Filing Fee & Certificate of Status	\$55 Filing For Certified Cop		\$60 Filing Fee. Certificate of Status & Certified Copy

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

The Epitome Group, LLC		
(Name of limited liability company)		
Delaware		
(Jurisdiction of its organization)		
This limited liability company is no longer transacting business in Florida and authority to transact business in this state.	surrenders its	
This limited liability company revokes the authority of its registered agent to accepts behalf and appoints the Department of State as its agent for service of procecuse of action arising during the time it was authorized to transact business in Flor	ept service on ss based on a ida.	
5157 N.W. 102nd Court		
(Mailing address)		
Doral, FL 33178	_	
(City/State/Zip)		
The limited liability company agrees to notify the Department of State in the change in its mailing address. Mil Jahren.	future of any	
(Signature of member or authorized representative of a member)	EAST OF	
Philip S. Lotane	ECR BCR BCR	CT PAGE
(Typed or printed name of signee)	C-6 AHII: 43	

Filing Fee: \$25.00