(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
A. LUNT						
OCT 18 2012						
EXAMINER						

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COVER LETTER

TO:

TO:			ion Section of Corpora					
SUBJE	ECT:	Riv	vergate /	Apartments, L.L.				
				(Name of Fore	eign Limited Lia	bility Co	ompany)	
Dear S	ir or N	⁄lada:	m:					• •
The enclosed withdrawal and fee(s) are submitted for filing.								1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
Please	return	all c	orresponde	ence concerning this	matter to the fol	lowing:		NA SSE
Scott	Cros	ssfie	eld					
			(1	Name of Person)				40.80
BSR	Trus	st, L	LC					
			(1	Firm/Company)				
105	Talla	poc	sa St S	te 300				
			(,	Address)				
Mont	tgom	ery	, AL 361	04				
			(City/State and Zip Code	e)			
For fu	ther is	nforn	nation con	eerning this matter, p	lease call:			
Scot	t Cro	ssfi	eld		at (334)	954-4458	_
			(Name of F	erson)		Code & I	Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301				n ations nter Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclos	sed is	a ch	eck for the	following amount:				
☑ \$25	Filin	g Fee		0 Filing Fee & ertificate of Status	S55 Filing F Certified Co		□ \$60 Filing Fee, Certificate of Status & Certified Copy	

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

	10
Divergete Apartments I I C	
Rivergate Apartments, L.L.C. (Name of limited liability company)	
Alabama	THE PARTY OF THE P
(Jurisdiction of its organization)	25 W
M0400003452	"⊒ ⊬
(Florida Document Number)	
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 accits behalf and appoints the Department of State as its agent for service of proceedause of action arising during the time it was authorized to transact business in Flo	ept service on ess based on a rida.
105 Tallapoosa St Ste 300	
(Mailing address)	
Montgomery, AL 36104	
(City/State/Zip)	
The limited liability company agrees to notify the Department of State in the change in its mailing address.	future of any
<u>se</u>	
(Signature of member or authorized representative of a member)	
Scott Crossfield	
(Typed or printed name of signee)	

Filing Fee: \$25.00