m04000003617

(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:		
FEB - 3 XIN A. LUNT		

Office Use Only



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TILED



ON SERVICE COMPANY	
ACCOUNT NO. : I2000000195	
REFERENCE : 986366 72	280744
AUTHORIZATION :	, 8
COST LIMIT : \$ 25.00	nea_
ORDER DATE : January 31, 2014	
ORDER TIME : 10:15 AM	
ORDER NO. : 986366-005	
CUSTOMER NO: 7280744	
FOREIGN FILINGS	
NAME: ELKHORN GP LLC	31 MULT
CORPORATE LIMITED PARTNERSHIP XX LIMITED LIABILITY COMPANY	
XXXX WITHDRAWAL/CANCELLATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF STATUS	
CONTACT PERSON: Susie Knight - EXT# 52956	
EXAMINER:	

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Elkhorn GP LLC	1, 1, 1,
(Name of limited liability company)	
Delaware	
(Jurisdiction of its organization)	
9/2/2004	
(Date registered with Florida Department of State)	
M04000003617	☆ 2
(Florida Document Number)	A. L
This limited liability company withdrawing its certificate of authority in	this state.
arif madde	T AN AR SEE, FLOR
(Signature of authorized representative)	三
Jennifer J. Madden	7.
(Typed or printed name of signee)	

Filing Fee: \$25.00