

M04000005233

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

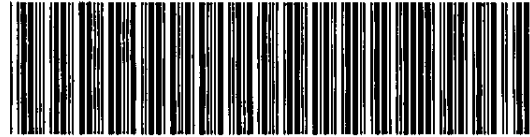
(Business Entity Name)

(Document Number)

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JAN 16 2014

EXAM

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MCZ/Centrum Jefferson, L.L.C.
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Amy Horan
(Name of Person)

Centrum Partners LLC
(Firm/Company)

225 W. Hubbard, 4th Floor
(Address)

Chicago, IL 60654
(City/State and Zip Code)

For further information concerning this matter, please call:

Amy Horan at (312) 279 1382
(Name of Person) (Area Code & Daytime Telephone Number)

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STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for 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

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

MCZ/Centrum Jefferson, L.L.C.

(Name of limited liability company)

Illinois

(Jurisdiction of its organization)

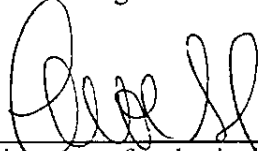
December 1, 2004

(Date registered with Florida Department of State)

M04000005233

(Florida Document Number)

This limited liability company withdrawing its certificate of authority in this state.



(Signature of authorized representative)

Arthur Slaven

(Typed or printed name of signee)

FILED
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Filing Fee: \$25.00