## M0500000000

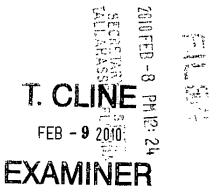
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## COVER LETTER

Division of Corporations		
SUBJECT: MCZ/Centrum Florida VI Ov	vner, L.L.C.	
	eign Limited Liability Company)	<del></del>
Dear Sir or Madam:		
The enclosed withdrawal and fee(s) are submitted	d for filing.	
Please return all correspondence concerning this	matter to the following:	
Stephanie Bengtsson		
(Name of Person)		
Centrum Properties		1911 1911 1911
(Firm/Company)		2010 FEB SECRET
225 W Hubbard 4th Floor		-8 PM 12: 24
(Address)		
Chicago IL 60654		2
(City/State and Zip Code	<b>;</b> )	<i>,</i> ,,
For further information concerning this matter, p	lease call:	
Caroline Stephenson	at ( 312 ) 832-2500	
(Name of Person)	(Area Code & Daytime Telephone Number)	
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:  \$\text{\$\text{\$\text{S25} Filing Fee}\$}\$ = \$\text{\$\text{\$\text{\$\text{\$\$}}\$30 Filing Fee & Certificate of Status}\$}\$	\$55 Filing Fee & \$60 Filing Fee, Certified Copy Certificate of Status & Certified Copy	

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

MCZ/Centrum Florida VI Owner, L.L.C.	·
(Name of limited liability company)	
Illinois	
(Jurisdiction of its organization)	
This limited liability company is no longer transacting business in authority to transact business in this state.	Florida and surrenders its
This limited liability company revokes the authority of its registered its behalf and appoints the Department of State as its agent for ser cause of action arising during the time it was authorized to transact but	l agent to accept service on vice of process based on a usiness in Florida.
225 W Hubbard 4th Floor	
(Mailing address)	
Chicago IL 60654	
(City/State/Zip)	
The limited liability company agrees to notify the Department of change in its mailing address.	State in the future of any
Edean Eruster	
(Signature of member or authorized representative of a member)	50 E
Stephanie Bengtsson	kin Cal
(Typed or printed name of signee)	E G
	స్ట్రిస్ట్ స్టిస్ట్ స్టిస్ట్ స్ట్రిస్ట్ స్ట్రిస్ట్ స్ట్రిస్ట్ స్టిస్ట్ స్టిస్ట్ స్ట్రిస్ట్ స్ట్రిస్ట్ స్ట్రిస్ట్ స్టిస్ట్ స్ట్రిస్ట్ స్టిస్ట్ స్ట్
	mg p

Filing Fee: \$25.00