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(((H10000256213 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023

: (850)222-1092

Phone Fax Number

: (850)878-5368

LLC DISSOLUTION OR WITHDRAWAL

Certificate of Status Certified Copy 0 Page Count 03 Estimated Charge \$25.00

BOYNTON SHOPPES MEMBER LLC

Electronic Filing Menu

Corporate Filing Menu

D. BRUCE

DEFP 1 2010

EXAMINER

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COVER LETTER

TO: Registration Division of	Section Corporations						
SUBJECT: Boynto	on Shoppes Member LLC (Name of Fore	ign Limited Lia	bility Com	рапу)			
Dear Sir or Madam:							
The enclosed withdra	awal and foc(s) are submitted	for filing.					
Please return all com	espondence concerning this	matter to the foll	owing:				
Catherine O'Doherty							
	(Name of Person)						
Stroock & Stroock &	Lavan, LLP						
	(Firm/Company)				产	7	
180 Maiden Lane					AHAS AHAS	NOV 30	La effection,
	(Address)				(0)27 [1]-4	30	Foregon (by a)
New York, NY 1003	8						
	(City/State and Zip Code	:)				3K	
For further informati	on concerning this matter, p	lease call;			On.	Ñ	
Tara Nyack c/o Stro	ock & Stroock & Lavan LLF	at (212) 80	06-6404			
(N	une of Person)	(Area C	Code & Day	rime Telephone Number)			
Registration Division of Clifton Buil 2661 Execu	Corporations		Registration of P.O. Box (G ADDRESS: on Section of Comporations 6327 se, Florida 32314			
Enclosed is a check	for the following amount:						
S25 Filing Fee	Status 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

	oppes Member LLC
	(Name of limited liability company)
Delaware	
	(Jurisdiction of its organization)
M05000001	482
	(Florida Document Number)
This limit authority	ted liability company is no longer transacting business in Florida and surrenders its to transact business in this state.
This limit	ed liability company revokes the authority of its registered agent to accept service on and appoints the Department of State as its agent for service of process based on a ction arising during the time it was authorized to transact business in Florida.
cause of a	ction arising during the time it was authorized to transact business in Florida.
cause of a	ction arising during the time it was authorized to transact business in Florida. P.O. Box 5005
cause of a	
cause of a	P.O. Box 5005

Commingled Pension Trust Fund (Special Situation Property)

of JPMorgan Chase Bank, N.A., as sole member By: JPMorgan Chase Bank, N.A., as trustee

> Name: Julie Arenas Flynn Title: Vice President

> > Filing Fee: \$25.00