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T. HAMPTON

APR 1 6 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT. MIRROR COLONY APARTMENTS, LLC
(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:
TRACY THONG
(Name of Person)
NATIONAL COMMEDIAL VENTURES
NATIONAL COMMERCIAL VENTURES (Firm/Company)
(i mir company)
12100 WILSHIRE BLVD., SUITE 250
(Address)
1.00 11.05 50 01.0005 74.7
LOS ANGELES, CA 90025-7117 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
TRACY THONG at (310) 826-7301 かんのい
(Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations Division of Corporations Division of Corporations
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314
Tallahassee, Florida 32301
Enclosed is a check for the following amount:
✓ \$25 Filing Fee \$30 Filing Fee & \$55 Filing Fee & \$60 Filing Fee,
Certificate of Status Certified Copy Certificate of Status & Certified Copy

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

MIRROR COLONY APARTMENTS, LLC	
(Name of limited liability company)	
WASHINGTON	
(Jurisdiction of its organization)	
This limited liability company is no longer transacting business in Florida and surrenders authority to transact business in this state.	its
This limited liability company revokes the authority of its registered agent to accept service its behalf and appoints the Department of State as its agent for service of process based cause of action arising during the time it was authorized to transact business in Florida.	on on a
12100 WILSHIRE BLVD., SUITE 250 (Mailing address)	
LOS ANGELES, CA 90025 - 7117 (City/State/Zip)	
The limited liability company agrees to notify the Department of State in the future of change in its mailing address.	any
(Signature of member or authorized representative of a member)	
RICHARD NATHAN	5 . :
(Typed or printed name of signee)	00 ¥ 8€

Filing Fee: \$25.00