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COVER LETTER

	stration S sion of Co	ection orporations		
SUBJECT:	TCS-C			
		(Name of For	eign Limited Liability (Lompany)
Dear Sir or M	ladam:			
The enclosed	withdraw	al and fee(s) are submitted	d for filing.	
Please return	all corresp	oondence concerning this	matter to the following	:
Peter A. M	/lardinly	,Esq.		
		(Name of Person)		•
Belmont Ir	nvestm	ent Corp.		
		(Firm/Company)		•
900 W. Sp	oroul Ro	oad, Suite 101		
		(Address)		
Springfield	d, PA 1	9064		
	· · · · · · · · · · · · · · · · · · ·	(City/State and Zip Cod	e)	
For further in	formation	concerning this matter, p	lease call:	
Peter A. M	/lardinly	,	610 at (543-3333
·	(Nam	e of Person)	(Area Code &	Daytime Telephone Number)
Regi Divis Clift 2661	istration S sion of Co on Buildi I Executiv	orporations ng e Center Circle	Regist Divisi P.O. E	ING ADDRESS: ration Section on of Corporations Box 6327 assee, Florida 32314
		lorida 32301		
Enclosed is a	check fo	r 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

TCS-CB, LLC

(Name of limited liability company)		=
Delaware		
(Jurisdiction of its organization)		-
6/21/2005		
(Date registered with Florida Department of State)		-
M0500003543		
(Florida Document Number)		-
This limited liability company is withdrawing its certificate of authority in this state.		
(Signature of authorized representative) Barry J. Belmont, President (Typed or printed name of signee)	15 JUN 22 AM SECRETARY OF TALLAHASSEE, F	To strong the section of the section
	12: 52 SIAII	Provide the second

Filing Fee: \$25.00