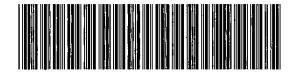
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08 MAY -9 PM 1: 30
SECRETARY OF STATE
ANALYSEE, FLORIDA

D. BRUCE

MAY 1 2 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corpor					
SUBJECT: EXPRESSWAY VILLAGE SHOPPING CENTER, LLC					
(Name of Foreign Limited Liability Company)					
Dear Sir or Madam:					
The enclosed withdrawal an	d fee(s) are submitte	ed for filing.			
Please return all corresponde	ence concerning this	s matter to the followi	ng:		
Rafat Shaikh					
(1	Name of Person)		_		
Expressway Village	Shopping Cen	ter, LLC			
	Firm/Company)		<u>-</u>	式	
				TI SEGI	
6961 Peachtree Industrial Blvd., Suite 101 독급					
(4	Address)		_	SSE	
Norcross, GA 30092	2			OF S	
(City/State and Zip Code)					
				D.F	
For further information cond	cerning this matter,	please call:			
Rafat Shaikh		at (770	, 409-9910 Ext 10		
(Name of P	'erson)	(Area Code	& Daytime Telephone Number)		
STREET/COURI	ER ADDRESS:	MA	ILING ADDRESS:		
		stration Section sion of Corporations			
Clifton Building P.O. Box 6327		Box 6327			
2661 Executive Center Circle Tallahassee, Florida 32301		Talla	ahassee, Florida 32314		
Enclosed is a check for the	following amount	:			
	00 Filing Fee & ertificate of Status	\$55 Filing Fee & Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy		

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

(Name of limited liability company)	
Georgia	
(Jurisdiction of its organization)	
This limited liability company is no longer transacting business in Florica authority to transact business in this state.	da and surrenders its
This limited liability company revokes the authority of its registered agent its behalf and appoints the Department of State as its agent for service o cause of action arising during the time it was authorized to transact business	to accept service on f process based on a in Florida.
6961 Peachtree Industrial Blvd., Suite 101 (Mailing address)	
Norcross, GA 30092 (City/State/Zip)	
The limited liability company agrees to notify the Department of State change in its mailing address.	in the future of any
(Signature of member or authorized representative of a member)	, -
Rafat Shaikh, Member	#
(Typed or printed name of signee)	OR MAY -9 PM 1: 3. SEURE BARY OF STATE ALLAHASSEE, FLORIC

Filing Fee: \$25.00