## M0500003928

(Re	equestor's Name)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Special Instructions to Filing Officer:		



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MK 11/27



ACCOUNT NO. : 072100000032		
REFERENCE : 331560 4348715		
AUTHORIZATION :		
COST LIMIT : \$ 25.00		
ORDER DATE: November 26, 2007		
ORDER TIME: 5:35 PM		
ORDER NO. : 331560-055		
CUSTOMER NO: 4348715		
FOREIGN FILINGS		
NAME: ORLANDO FLEX ASSOCIATES LLC		
CORPORATE LIMITED PARTNERSHIP XX LIMITED LIABILITY COMPANY		
XXXX WITHDRAWAL/CANCELLATION		
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF STATUS		
CONTACT PERSON: Jeanine Reynolds - EXT# 2933		
EYAMINED.		

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

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR
WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN
FLORIDA
Orlando Flex Associates LLC  (Name of limited liability company)  Delaware  (Aurisdiction of its organization)
Orlando Flex Associates LLC
(Name of limited liability company)
Delawara
Delaware (Aurisdiction of its organization)
This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.
authority to transact business in this state.
This limited liability company revokes the authority of its registered agent to accept service on
This limited liability company revokes the authority of its registered agent to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business in Florida.
The state of the s
925 Think Annual 25th Floor
825 Third Avenue, 36th Floor (Malling address)
·
N W Maria 10022
New York, New York 10022 (City/State/Zip)
The limited lightlity company agrees to notify the Department of State in the fithire of any
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
Margar M. Voll
(Signature of member or authorized representative of a member)
V
Wayne M. Lopkin
(Typed or printed name of signee)

Filing Fee: \$25.00