

MOS 000005215

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

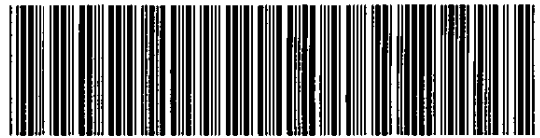
(Business Entity Name)

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T. CLINE

FEB - 9 2010

EXAMINER

MOS-5215

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MCZ/Centrum Florida XIX, L.L.C.
(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:

Stephanie Bengtsson
(Name of Person)

Centrum Properties
(Firm/Company)

225 W Hubbard 4th Floor
(Address)

Chicago IL 60654
(City/State and Zip Code)

2010 FEB - 8 PM 12: 40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Caroline Stephenson at (312) 832-2500
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for 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

