

12/24/2014 8:50:49

To: 87661763

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 DEC 24 PM 4:40

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LLC DISSOLUTION OR WITHDRAWAL
ACPRE BAL GEN-PAR, L.L.C.

Certificate of Status	0
Certified Copy	0
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DIVISION OF CORPORATIONS
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DEC 29 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ACPRE BAL Gen-Par, 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:

(Name of Person)

ACPRE BAL Gen-Par, L.L.C.
(Firm/Company)

(Address)

(City/State and Zip Code)

For further information concerning this matter, please call:

_____ at (_____) _____
(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

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

ACPRE BAL Gen-Par, L.L.C.

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

12/05/2005

(Date registered with Florida Department of State)

M05000006686

(Florida Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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This limited liability company is withdrawing its certificate of authority in this state.

By:



(Signature of authorized representative)

Thomas Dowling, Manager of Archon Administrative Services, LLC, Manager

(Typed or printed name of signee)

Filing Fee: \$25.00