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| (Requestor's Name) | | |
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| PICK-UP WAIT MIL | | |
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| (Business Entity Name) | | |
| (Business Entry Harris) | | |
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| Certified Copies Certificates of Status | | |
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| Special Instructions to Filing Officer: | | |
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Office Use Only



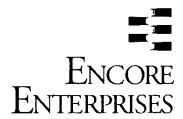
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SECRETARY OF STATE
TALLAHASSEE, FI MBIE,



5005 LBJ FREEWAY SUITE 1200 DALLAS, TX 75244 PHONE: 214 259-7000 FAX: 214 259-7001 E-MAIL: mail@encore.bz

November 30, 2007

Florida Department of State Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Applications for Withdrawal of Certificate of Authority

Dear Representative:

Enclosed please find three (3) Applications for Withdrawal of Certificate of Authority in the State of Florida, along with a check in the amount of \$95.00 representing the filing fees applicable to each entity.

Please contact the undersigned should you have any questions or concerns regarding the submission of these applications or the filing fees for these entities at the number referenced above.

Sincerely,

Carol Pierce Paralegal

:cp

Enclosures

COVER LETTER

| TO: Registration Section Division of Corporations | | |
|--|---|---|
| SUBJECT: ENCORE TAMPA, LLC | Coreign Limited Liability Compar | ny) |
| Dear Sir or Madam: | | |
| | tad for filling | |
| The enclosed withdrawal and fee(s) are submitted | - | |
| Please return all correspondence concerning thi | is matter to the following: | |
| CAROL PIERCE | | |
| (Name of Person) | | |
| ENCORE ENTERPRISES, IN | IC | |
| (Firm/Company) | | 200 SE TALI |
| 5005 LBJ FREEWAY, SUITE | ≣ 1200 | DI DEC -5 A II CRETARY OF ST LAHASSEE, FLO |
| (Address) | | C" 100 |
| DALLAS, TX 75244 | | A II: 3: OF STATE E. FLORIDA |
| (City/State and Zip Co | ode) | 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 |
| For further information concerning this matter, | please call: | Α ω |
| CAROL PIERCE | _at(214) 259 | 9-7000 |
| (Name of Person) | (Area Code & Daytime | e 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 | Certified Copy Ce | 60 Filing Fee, ertificate of Status & ertified Copy |

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

| ENCORE TAMPA, LLC |
|---|
| (Name of limited liability company) |
| DELAWARE |
| (Jurisdiction of its organization) |
| This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state. |
| 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. |
| 5005 LBJ FREEWAY, SUITE 1200 ₽ |
| (Mailing address) LCRE DEC TAHASARY -5 DALLAS, TX 75244 |
| (City/State/Zip) |
| The limited liability company agrees to notify the Department of State the future of any change in its mailing address. |
| alle & Marray |
| (Signature of member or authorized representative of a member) |
| Alan L. Murray |
| (Typed or printed name of signee) |

Filing Fee: \$25.00