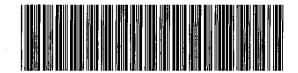
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| (Re | equestor's Name) | |
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| (Ad | dress) | |
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| (Cit | :y/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | ne) |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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OIVISION OF CORPORATIONS

J. BRYAN

MAY 1 3 2008

EXAMINER

COVER LETTER

| TO: Registration Section Division of Corporations | |
|--|-----------|
| SUBJECT: TCP-OG, LUC (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: | |
| Kathryn Boehm (Name of Person) | ک |
| Clo TCP-OG LLC | na May 12 |
| (Firm/Company) | 2 |
| 1200 N, Federal Huy #411 | PH 3:5 |
| | ထ |
| Boca Katon Fe 33432 | |
| (City/State and Zip Code) | |
| For further information concerning this matter, please call: | |
| Kuthryn Boehm at (561) 368-3604 (Area Code & Daytime Telephone Number) | |
| (Maile of Feison) (Mea code & Daytine Feispholie Mailiber) | |
| STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section | |
| Division of Corporations Division of Corporations | |
| Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 | |
| Enclosed is a check for the following amount: | |
| \$25 Filing Fee \$\ \tag{S55 Filing Fee \& Certificate of Status} \tag{S55 Filing Fee \& Certificate of Status \& Certified Copy} \tag{S60 Filing Fee, Certificate of Status \& Certified Copy} \tag{Certified Copy} | |

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

| TCP-OG, LLC | |
|--|------------------|
| (Name of limited liability company) | |
| Delaware LLC | |
| (Jurisdiction of its organization) | |
| This limited liability company is no longer transacting business in Florida and surrend authority to transact business in this state. | ers its |
| This limited liability company revokes the authority of its registered agent to accept servits behalf and appoints the Department of State as its agent for service of process base cause of action arising during the time it was authorized to transact business in Florida. | ice on d on a |
| 1200 N. Kederal Hwy 1411 (Mailing address) | |
| (watting addiess) | |
| Boca Ration FL 33432 | |
| (City/State/Zip) | |
| The limited liability company agrees to notify the Department of State in the future change in its mailing address. | of any |
| | |
| (Signature of member or authorized representative of a member) Jest Enterprises LC It's Manger Jestie L. Hevandel | |
| (Typed or printed name of signee) | |
| | 08 HAY 12 PH 3: |
| | 7 |
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| | α <u>§</u> |

Filing Fee: \$25.00