

MO600000 1874

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

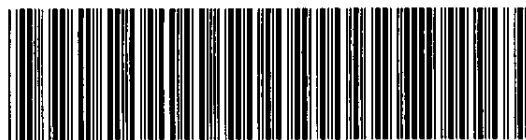
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700265722827

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2014 DEC 31 AM 10:51
NOT RETURNED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

FILED
14 DEC 31 AM 10:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN -2 2015
T. HAMPTON

ACCOUNT NO. : I20000000195

REFERENCE : 444374 4306525

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : December 30, 2014

ORDER TIME : 9:47 AM

ORDER NO. : 444374-005

CUSTOMER NO: 4306525

FOREIGN FILINGS

NAME: LASER PARTNERS GP, LLC

☐ CORPORATE
☐ LIMITED PARTNERSHIP
☒ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Courtney Williams - EXT# 62935

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LASER PARTNERS GP, LLC
(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:

PETER VISALLI

(Name of Person)

SILLS CUMMIS & GROSS, PC

(Firm/Company)

ONE RIVERFRONT PLAZA

(Address)

NEWARK, NJ 07102

(City/State and Zip Code)

For further information concerning this matter, please call:

PETER VISALLI

(Name of Person)

973

at ()

643-4386

(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:

- | | | | |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &
Certified Copy | <input type="checkbox"/> \$60 Filing Fee,
Certificate of Status &
Certified Copy |
|---|---|--|--|

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

LASER PARTNERS GP, LLC

(Name of limited liability company)

DELAWARE

(Jurisdiction of its organization)

03/31/2006

(Date registered with Florida Department of State)

M06000001874

(Florida Document Number)

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

Eric Weisman, MANAGER
(Signature of authorized representative)

ERIC WEISMAN MANAGER
(Typed or printed name of signee)

Filing Fee: \$25.00

FILED
14 DEC 31 AM 10:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA