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Division of Corporations

Fax Number : (850) 617-6383

Frem:

Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (850) 205-8842 Fax Number : (850)878-5368

> LLC DISSOLUTION OR WITHDRAWAL LOOP WEST, LLC

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K. SALY EXAMINER

DEC 17 2015

## **COVER LETTER**

TO:	Registration Division of	n Section Corporations		
SUBJEC	CT:	Loop West, LLC		
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(Name of Fo	oreign Limited Liability	Company)
Dear Sir	or Madam:			
The encl	losed withdr	awal and fee(s) are submitt	ed for filing.	
Please re	eturn all con	respondence concerning thi	s matter to the following	:
		(Name of Person)		•
		(Firm/Company)		
				•
		(Address)		
		(/ tadioos)		
		(City/State and Zip Co	de)	
For furth	er informati	on concerning this matter,	please call:	
	•			
		ame of Person)	at (	Daytime Telephone Number)
		,	<b>,</b>	•
STREET/COURIER ADDRESS: Registration Section Division of Corporations			ING ADDRESS:	
		Registration Section Division of Corporations		
	Clifton Buil			ox 6327
		tive Center Circle		assee, Florida 32314
	Tallahassee	, Florida 32301		
Enclosed	d is a check	for the following amount	:	
□ \$25 F	iling Fee	\$30 Filing Fee &	S \$55 Filing Fee &	□ \$60 Filing Fee,
		Certificate of Status	Certified Copy	Certificate of Status & Certified Copy

12/16/2015 3:42:27 PM From: To: 8506176383( 3/3 )



## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

LOOP WEST, LLC	
(Name of limited liability company)	
Delaware	
(Jurisdiction of its organization)	_
04/25/2006	
(Date registered with Florida Department of State)	
M06000002362	
(Florida Document Number)	
This limited liability company is withdrawing its certificate of authority in this state.  (Signature of authorized representative)  Thomas E. Quinn	
(Typed or printed name of signee)	

Filing Fee: \$25.00