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COVER LETTER

| Division of Corporations | | | |
|--|--------------------|---------------------|---|
| SUBJECT: North GHTE PLAZA, 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: | | | |
| Henry Schreiber (Name of Person) | | | |
| (Firm/Company) | | | - |
| 1801 Chandelle Court (Address) Spruce Creek Port Orange F1 32128 (City/State and Zip Code) For further information concerning this matter, please call: | SECRETARY OF STATE | 06 AUG 24 AM 10: 08 | |
| Adrian Schreiber at (813) 835 9025 (Name of Person) (Area Code & Daytime Telephone Number) | —— —— | 8 | |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAHLING ADDRESS: Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 | | | |
| Enclosed is a check for the following amount: | | | |
| \$25 Filing Fee \$\ \text{Certificate of Status} \text{S55 Filing Fee & \text{Certified Copy} \text{Certified Copy} \text{Certified Copy} \text{Certified Copy} | | | |

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

| North gate Plaza LLC (Name of limited liability company) | |
|--|--|
| (Name of limited liability company) | |
| COCOGGGGG TN | |
| (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. | |
| 1801 Chandelle Court (Mailing address) | |
| Port Organ F1 32128 (City/State/Zip) | |
| The limited liability company agrees to notify the Department of State in the future of any schange in its mailing address. A H Cign School become a series of a member of the future of a member of the future of a member of a member of a member of the future of a member of a member of a member of the future of a member of a member of a member of the future of a member of a member of a member of the future of a member of a member of the future o | |
| (Typed or printed name of signee) | |

Filing Fee: \$25.00