

MA6000007095

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

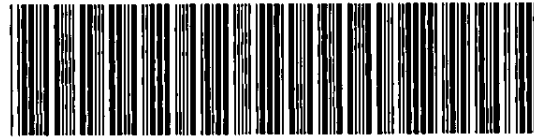
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600239375966

RECEIVED  
TALLAHASSEE, FLORIDA

2012 SEP 28 PM 4:24

12 SEP 28 AM 11:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

D. BRUCE  
OCT 1 2012  
EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 363237 7122203

AUTHORIZATION :

COST LIMIT : \$ 25

*Spivey*

ORDER DATE : September 28, 2012

ORDER TIME : 1:37 PM

ORDER NO. : 363237-010

CUSTOMER NO: 7122203

FOREIGN FILINGS

NAME: FOUNTAINS TITLE HOLDER, L.L.C.

☐ 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: Harry B. Davis - EXT# 2926

EXAMINER: \_\_\_\_\_

APPROVED  
AND  
FILED

12 SEP 28 AM 11:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Fountains Title Holder, L.L.C.

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

M06000007095

(Florida Document Number)

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.

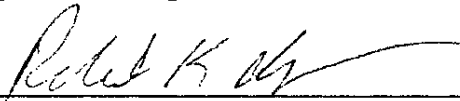
200 E. Randolph

(Mailing address)

Chicago, IL 60601

(City/State/Zip)

The limited liability company agrees to notify the Department of State in the future of a change in its mailing address.



(Signature of member or authorized representative of a member)

Robert K. Hagan, VP/Asst Sec of LaSalle Income & Growth Fund IV, its member

(Typed or printed name of signee)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12 SEP 28 AM 11:21

APPROVED  
AND  
FILED

**Filing Fee: \$25.00**