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	(Re	equestor's Name	,
	(Ad	ldress)	
	(Ad	ldress)	
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P	ICK-UP	<b></b> WAIT	MAIL
	(Bu	ısiness Entity Na	me)
	/5-		<u> </u>
	(DC	ocument Number	)
Certified Copid	es	Certificate	es of Status

Special Instructions to Filing Officer:

A. LUNT

FEB 27 2011

**EXAMINER** 

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SEUKE IARY OF STATE TALLAHASSEE. FLORIDA

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## **COVER LETTER**

TO: Registration Division o	on Section f Corporations			
SUBJECT: JWC	Congdon Bayside Prop (Name of Fo	perties, LLC preign Limited Liability	Company)	<del></del>
	`		1 07	
Dear Sir or Madam	:			
The enclosed withd	rawal and fee(s) are submitt	ed for filing.		
Please return all cor	respondence concerning thi	s matter to the following	<b>;</b> :	
Bruce Rich				
	(Name of Person)			
				ZSE
Schell Bray PL	.LC			CAE
· · · · · · · · · · · · · · · · · · ·	(Firm/Company)			IAS.
230 North Elm	Street, Suite 1500			FLOR
	(Address)			那是
Greensboro N	lorth Carolina 27401			<b>₹</b> ?•
	(City/State and Zip Co	de)		
For further informat	ion concerning this matter,	please call:		
Bruce Rich		at (336	370-8815	
, (N	ame of Person)	(Area Code &	Daytime Telephone Number)	
Registratio Division of Clifton Bui 2661 Exect	Corporations	Regist Divisio P.O. B	ration Section on of Corporations ox 6327 assee, Florida 32314	
Enclosed is a check	for the following amount			
☑ \$25 Filing Fee sb; Q gass	■ \$30 Filing Fee & Certificate of Status	☐ \$55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Copy	

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

_	45° 25'
JWCongdon Bayside Properties, LLC	MARTE
(Name of limited liability company)	至 82
	SS
Delaware	<b>新山 理</b>
(Jurisdiction of its organization)	Elsi 😘
M0700000400	高温 5
(Florida Document Number)	an est
This limited liability company is no longer transacting business in Florida and sauthority to transact business in this state.	surrenders its
This limited liability company revokes the authority of its registered agent to acce its behalf and appoints the Department of State as its agent for service of proces cause of action arising during the time it was authorized to transact business in Florical Control of the Co	pt service on s based on a da.
300 N. Greene Street, Suite 1000	
(Mailing address)	<del>_</del>
Greensboro, North Carolina 27401	_
(City/State/Zip)	
The limited liability company agrees to notify the Department of State in the f change in its mailing address.	uture of any
Rabutt Cox L. Fruites	
(Signature of member or authorized representative of a member)	
Robert A. Cox, Jr., Manager of Sole Member	
(Typed or printed name of signee)	

Filing Fee: \$25.00