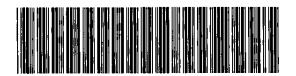
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COVER LETTER

:CT Registration Section Division of Corporations Twin Palms, 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: Thomas M. Mitchell (Name of Person) Blake Management Group, LLC (Firm/Company) 800 Woodlands Parkway, Ste 107 (Address) Ridgeland, MS 39157 (City/State and Zip Code) For further information concerning this matter, please call: Thomas M. Mitchell (Name of Person) (Area Code & Daytime Telephone Number) STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: □ \$55 Filing Fee & □ \$60 Filing Fee, □ \$25 Filing Fee ■ \$30 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

win Palms, LLC	
(Name of limited liability company)	
Mississippi	
(Jurisdiction of its organization)	
lune 4, 2007	
(Date registered with Florida Department of State)	
<i>М</i> 0700003346	
(Florida Document Number)	

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

Authorized Representative

(Typed or printed name of signee)

Filing Fee: \$25.00