(Re	equestor's Name)						
(Address)							
(Ac	ldress)						
(Ci	ty/State/Zip/Phone	e #)					
PICK-UP	☐ WAIT	MAIL					
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ACCOUNT NO. : 12000000195								
REFERENCE : 606315 7548233								
AUTHORIZATION:								
COST LIMIT : \$ 55.00								
ORDER DATE: April 10, 2013								
ORDER TIME : 3:54 PM								
ORDER NO. : 606315-005								
CUSTOMER NO: 7548233								
FOREIGN FILINGS								
NAME: RBC TAX CREDIT EQUITY, LLC								
CORPORATE LIMITED PARTNERSHIP XX LIMITED LIABILITY COMPANY								
XXXX WITHDRAWAL/CANCELLATION .								
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:								
XX CERTIFIED COPY CERTIFICATE OF STATUS								
CONTACT PERSON: Susie Knight - EXT# 52956								
EXAMINER:								

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

RBC TAX CREDIT EQUITY, LLC
(Name of limited liability company)
ILLINOIS
(Jurisdiction of its organization)
(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 Vesey Street, 5th Floor c/o Subsidiary Governance Department
(Mailing address)
New York, NY 10281
(City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address. (Signature of member or authorized representative of a member)
Mirela Hadzic, Assistant Secretary
(Typed or printed name of signee)
Arr -

Filing Fee: \$25.00

COVER LETTER

		ration S on of C	Section orporations			
SUBJECT	r. R	BC TA	X CREDIT EQUITY, LL	c		A STATE OF THE PARTY OF THE PAR
, ,			(Name of For	eign Limited Li	ability C	Company)
Dear Sir o	r Ma	dam:				
The enclos	ed w	vithdrav	val and fee(s) are submitte	d for filing.		
Please retu	ım al	Leorres	spondence concerning this	matter to the fol	llowing:	
Esther S. I	Hellv	wig.				
			(Name of Person)			
						t v v
RBC TAX	CŔ	EDIT È	QUITY, LLC			
<u> </u>			(Firm/Company)		 ,	
200 Vesey	/ Stro	cet, 5th	Floor			
			(Address)	· // //		
New York	, NY	7 10281			•	
· · · · · · · · · · · · · · · · · · ·			(City/State and Zip Cod	e)		
For further	info	rmatio	n concerning this matter, p	lease call;		
Mirela Ha	dzic			212 at (,	858-6029
· <u> </u>	-	(Nan	ne of Person)		Code &	Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed i	sac	heck fo	or the following amount:			
		S55 Filing F Certified Co		□ \$60 Filing Fee, Certificate of Status & Certified Copy		