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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (614)280-3338

Fax Number

: (954)208-0845

LLC DISSOLUTION OR WITHDRAWAL CPT 355 ALHAMBRA CIRCLE, LLC

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COVER LETTER

COVER LETTER TO: Registration Section Division of Corporations SUBJECT: (Name of Foreign Limited Liability Company) Dear Sir or Madam: The enclosed withdrawal and Re(s) are submitted for filing. Please return all correspondence concerning this matter to the following. Amenda Jackson (Name of Person) (Firm/Corporation System) (Firm/Corponation System) (City/State and Zip Code) For further information concerning this matter, please call: (City/State and Zip Code) (City/State and Zip Code) STREET/COURIER ADDRESS: Registration Section Division of Corporations Cition Building Code Executive Cancer Citric Tallahassee, Florida 32301 Enclosed is a check for the following amount: \$\textstyle{\textstyle{C}} \textstyle{\textstyle{C}} \textstyle{C		, ··.	
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NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

CPT 355 Alhambra Circle, I	LLC		
	(Name of limited liability company)		× -
Delaware			
	(Jurisdiction of its organization)		1: 4-2
07/18/2008			•
	(Date registered with Florida Department of State)	. % : :	
M08000003384			
	(Florida Document Number)		

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

(Signature of Authorized representative)
James J. Finnegan
Authorized Signatory

(Typed or printed name of signee)

Filing Fee: \$25 AA

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