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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number

: (850)878-5368

LLC DISSOLUTION OR WITHDRAWAL I-595 HOLDCO LLC

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C. LEWIS

OCT 7 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 1-595 HoldCo LLC
(Name of Foreign Limited Liability Company)
Dear Sir or Madam:
The enclosed withdrawal and fee(s) are submitted for filling.
Please return all correspondence concerning this matter to the following:
(Name of Person)
Macquariz Capital (USA) Ina (Phro/Company)
125 West 55 th Street, 9 FC (Address)
New York, NY 10019 (City/State and Zip Code)
For further information concerning this matter, please call:
Shemesia St. Cloud st (A12) 231 - OTTO (Area 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 is a check for the following amount:

🖵 \$25 Filing Fee

🗅 \$30 Filing Fee & Certificate of Status 🗅 \$55 Filing Fee & Certified Copy

☐ \$60 Filing Fee, Certificate of Status & Conifled Copy

FILED

" Unimiliaria

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

SECRETARY OF STATE TALLAHASSEE, FLORID.

I-595 HoldCo LLC (Name of limited liability company)	
Delaware	
(Jurisdiction of its organization)	
M08000003648	
(Florida Document Number)	
This limited liability company is no longer transacting business in Florida and authority to transact business in this state.	surrenders its
This limited liability company revokes the authority of its registered agent to act its behalf and appoints the Department of State as its agent for service of procedures of action arising during the time it was authorized to transact business in Figure 2.	cept service on ess based on a rida.
125 West 55th Street	<u></u>
(Mailing address)	
New York, NY 10019	
(City/State/Zip)	
The limited liability company agrees to notify the Department of State in the change in its mailing address.	future of any
Signature of riember or authorized representative of a member)	
Anna Baniface	•
(Typed or printed name of signee)	T 2
(2) pod 01 primod mano 02 2.8)	
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Filing Fee: \$25.00