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## **COVER LETTER**

Registration Section TO: Division of Corporations RANDSTAD PROFESSIONALS GENERAL PARTNER, LLC SUBJECT: (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: **RAY S MOCK** (Name of Person) RANDSTAD TAX GROUP (Firm/Company) 150 PRESIDENTIAL WAY (Address) **WOBURN, MA 01801** (City/State and Zip Code) For further information concerning this matter, please call: 589-8483 **RAY S MOCK** (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: ■ \$25 Filing Fee □ \$30 Filing Fee & □ \$55 Filing Fee & □ \$60 Filing Fee,

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## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

RANDSTAD PROFESSIONALS GENERAL PARTNER, LLC
(Name of limited liability company)
DELAWARE
(Jurisdiction of its organization)
09/22/2008
(Date registered with Florida Department of State)
M0800004328
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
(Signature of authorized representative)
ROBERT J CALABRO, VICE PRESIDENT
(Typed or printed name of signee)

Filing Fee: \$25.00