

Division of Corporations

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**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

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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
ALLIANCE ES PALM GROVE, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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FEB 14 2013

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALLIANCE ES PALM GROVE, 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:

ROBIN KYLE

(Name of Person)

C-III ASSET MANAGEMENT LLC

(Firm/Company)

5221 N. O'CONNOR BLVD., STE. 600

(Address)

IRVING, TX 75039

(City/State and Zip Code)

For further information concerning this matter, please call:

ROBIN KYLE

(Name of Person)

at 972 868-5388

(Area Code & Daytime Telephone Number)

STREET/COURTIER 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 &
Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

ALLIANCE ES PALM GROVE, LLC

(Name of limited liability company)

DELAWARE

(Jurisdiction of its organization)

10/15/2008

(Date registered with Florida Department of State)

M08000004621

(Florida Document Number)

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



(Signature of authorized representative)

Robin Kyle

(Typed or printed name of signee)

Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA