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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Cintra Developments, 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:
Jose Antonio Caicoya - Cechinni
(Name of Person)
Cintra Developments, LLC.
(Firm/Company)
7700 Chevy Chase Dr Chase Park One (Suite 500) (Address)
Austin, TX 78752
(City/State and Zip Code)
For further information concerning this matter, please call:
Jose Antonio Caicoya - Cechinni at (512) 6378585
(Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 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 \$ \$55 Filing Fee & \$\sqrt{\$\sqt{\$\sqrt{\$\sq}}}}}}\$}}}} \end{\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sq}}}}}}}}}} }} \end{\sqrt{\$\sqrt{\$\sq}}}}}}} } } \end{\sqrt{\$\sq}\$}} } } } } } } } } } } }}}}}}}}}}}}}

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

(Name of limited liability company) TEXAS
TEYAS
ILAAG
(Jurisdiction of its organization)
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.
7700 Chevy Chase Dr Chase Park One (Suite 500) (Mailing address)
AUSTIN, TEXAS 78752 (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)
Belén Marcos / Carlos Ugarte
(Typed or printed name of signees)

Filing Fee: \$25.00

FILED

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