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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 JAN 19 PM 1:36

T. HAMPTON

JAN 20 2010

EXAMINER

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Lake City - Southern Mediplex Acquisition 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:

Nadene McGuire, Paralegal  
(Name of Person)

Polsinelli Shughart PC  
(Firm/Company)

700 West 47th Street, Suite 1000  
(Address)

Kansas City, MO 64112  
(City/State and Zip Code)

For further information concerning this matter, please call:

Nadene McGuire at ( 816 ) 360-4326  
(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

**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



700 W. 47th Street, Suite 1000  
Kansas City, MO 64112  
(816) 753-1000  
Facsimile: (816) 753-1536  
[www.polsinelli.com](http://www.polsinelli.com)

Nadene M. McGuire  
(816) 360-4326  
[nmcguire@polsinelli.com](mailto:nmcguire@polsinelli.com)

January 15, 2010

Florida Secretary of State  
Registration Section  
Corporation Division  
P.O. Box 6327  
Tallahassee, FL 32314

**Re: Lake City – Southern Mediplex Acquisition LLC**

Dear Ladies and Gentlemen:

Enclosed are the following documents for the above-referenced limited liability company that we are forwarding to you for processing:

1. Cover Letter
2. Application for Withdrawal.
3. Check in the amount of \$25.00 to cover the filing fee.

Please forward evidence of filing of the withdrawal to the undersigned.

If you have any questions, please let us know.

Very truly yours,

A handwritten signature in cursive script that reads "Nadene M. McGuire".

Nadene M. McGuire  
Paralegal

NMM  
Enclosures  
056638 / 127589  
NMMCG 1815941.1

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

Lake City - Southern Mediplex Acquisition LLC

(Name of limited liability company)

Delaware

(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.

c/o CWCapital Asset Management LLC, 701 13th Street NW, Suite 1000

(Mailing address)

Washington, DC 20005

(City/State/Zip)

The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.

CWCapital Asset Management LLC, a Massachusetts limited liability company, its Manager, but solely in its capacity as special servicer and authorized agent for the Member under a certain Pooling and Servicing Agreement

By: 

(Signature of member or authorized representative of a member)

**Patrick Connell**

Name: **Vice President** Title:

(Typed or printed name of signee)

Filing Fee: \$25.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 JAN 19 PM 1:06