

M09000001491

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

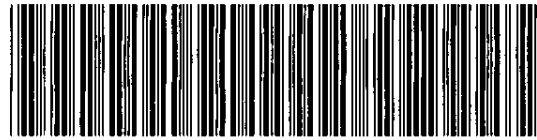
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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RECEIVED  
DEPARTMENT OF STATE  
15 MAR 24 PM 4:04

2015 MAR 24 AM 10:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

MAR 25 2015  
J. HARRIS

**TOLL FREE: 844-541-6792**

TINA GOFF, PRESIDENT

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Advanced Investment Partners, 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:

Stacy A. Rankin

(Name of Person)

Wintrust Financial Corporation

(Firm/Company)

9700 West Higgins Road, 8th Floor

(Address)

Rosemont, IL 60018

(City/State and Zip Code)

For further information concerning this matter, please call:

Stacy A. Rankin

(Name of Person)

at ( 847 ) 939-9000

(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

**NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY**

Advanced Investment Partners, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

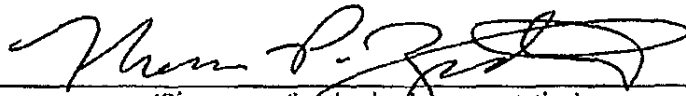
04/21/2009

(Date registered with Florida Department of State)

M09000001491

(Florida Document Number)

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



(Signature of authorized representative)

Thomas P. Zidar, Manager

(Typed or printed name of signee)

Filing Fee: \$25.00

FILED  
2015 MAR 24 AM 10:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA