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SECRETARY OF STATE

J. BRYAN

JAN 1 5 2009

EXAMINED

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: EuroPanache, L	LC		
	(Name of Foreign Limited	Liability Company)	
Dear Sir or Madam:			
The enclosed withdrawal and fee(s	s) are submitted for filing.		
Please return all correspondence c	oncerning this matter to the	following:	
Denise Roussinos		٦.,	، چسد (
(Name o	of Person)	JEC AF	10 JAN IL PH 1: 11
EuroPanache, LLC		ÁSSI	A F
(Firm/C	ompany)		유모
4601 35th Court East			
(Address	s)		
Bradenton, FL 34203			
(City/Sta	ate and Zip Code)		
For further information concerning	g this matter, please call:		
Denise Roussinos	at (9	41 , 773-2264	
(Name of Person)		ea Code & Daytime Telephone Number)	_
STREET/COURIER AI Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, Florida 3230	ircle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the follows: \$\sum{2}\$\$ \$25\$ Filing Fee \$\$30\$ Filing Certification \$\sum{2}\$\$ \$25\$ Filing Fee \$\$30\$ Filing \$\sum{2}\$\$ \$100\$ Filing \$\sum{2}\$\$ \$	<u> </u>		

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

EuroPanache, LLC	
(Name of limited liability company)	
Delaware	
(Jurisdiction of its organization)	
This limited liability company is no longer transacting business in Florida authority to transact business in this state.	a and surrenders its
This limited liability company revokes the authority of its registered agent to its behalf and appoints the Department of State as its agent for service of cause of action arising during the time it was authorized to transact business it	to accept service on process based on a n Florida.
410 Park Avenue 15th Floor	
(Mailing address)	
New York, NY 10022	
(City/State/Zip)	
The limited liability company agrees to notify the Department of State is change in its mailing address.	n the future of any
(Signature of member or authorized representative of a member)	
Robert J. Preston	SEC ALL
(Typed or printed name of signee)	JAN 14 PM 1: 11 CRETARY OF STATE AHASSEE, FLORIG

Filing Fee: \$25.00