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| uestor's Name) | | | | |
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| ☐ WAIT | MAIL. | | | |
| siness Entity Nan | ne) | | | |
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| Certificates | s of Status | | | |
| Special Instructions to Filing Officer: | | | | |
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SECRETARY OF STATE

MAR - 5 2013 J. BRYAN

COVER LETTER

| Division of | Corporations | | | |
|---|---|------------------------------------|--|----------------------|
| subject: SP | E LO HOLDI | NGS, LLC | | |
| Dear Sir or Madam: | | | | |
| The enclosed withdr | rawal and fee(s) are submitte | ed for filing. | | |
| Please return all cor | respondence concerning this | s matter to the followin | g: | |
| Dawn Bri | indamour | | | 2 |
| <u> </u> | (Name of Person) | | | TEE T |
| Textron F | Financial Cor | poration | _ | TALLAHASSEE, FLORIDA |
| 40 Westr | ninster Stree | t | _ | 2: 40 |
| | (Address) | | | |
| Providen | ce, RI 02903 | 3 | | |
| | (City/State and Zip Coc | le) | | |
| For further informat | ion concerning this matter, | please call: | | |
| Dawn Bri | indamour | _{3.} 401 | 621-4241 | |
| (N | lame of Person) | at (at (Area Code & | 2 Daytime Telephone Number) | |
| Registratio Division of Clifton Bui 2661 Exect | Corporations | Regis Divis P.O. 1 | LING ADDRESS: tration Section ion of Corporations 30x 6327 nassec, 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 | |

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

| SPE LO HOLD | INGS, LLC | TEG 1 |
|-------------|-------------------------------------|--------------|
| | (Name of limited liability company) | THE P M |
| Delaware | | Serie 3 |
| | (Jurisdiction of its organization) | 7.02 |
| M1000000016 | | The state of |

(Florida Document Number)

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.

| 40 Westminster Street | | | | |
|-----------------------|--|--|--|--|
| (Mailing address) | | | | |
| Providence, RI 02903 | | | | |
| (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)

Peter James, Senior Vice President

(Typed or printed name of signee)

Filing Fee: \$25.00