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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092 Phone Fax Number : (850)878-5368

LLC DISSOLUTION OR WITHDRAWAL TRITEX MAYFLOWER, LLC

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COVER LETTER

•	ion Section of Corporations			
SUBJECT:		TriTex Mayllower, L	LĊ	
COMPLETE SERVICE	(Name of Fo	oreign Limited Liability	Сотралу)	,
Dear Sir or Madae	n;			
The enclosed with	idrawal and fee(s) are submitt	ed for filing.		TO THE
Please return all c	orrespondence concerning thi	s matter to the following	g:	CO CO
	Hen Steed (Nume of Person)		-	13 FEB 19 M 8: 00
	Trimont Real Estate Advisor (Firm/Company)	s, linc.	-	ROPE
	3424 Peachtree Rd, NE, Suite (Address)	2200	-	
	Atlanta, GA 30326 (City/State and Zip Co	de)		
For further inform	ation concerning this matter,	please call;		·
	Ben Steed		581-7484	-
((Name of Ferson)	(Area Code &	Daytime Telephone Number)	
Registrati Division (Clifton B 2661 Exe	C/COURIER ADDRESS: ion Section of Corporations uilding outive Center Circle ee, Florida 32301	Regist Divisi P.O. E	LING ADDRESS: ration Section on of Corporations lox 6327 assec, Florida 32314	
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

TriTex Mayflower, LLC (Name of limited liability company)
(Name of limited liability company)
Georgia
(Jurisdiction of its organization)
M10000001381
M10000001381
(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.
3424 Peachtree Rd, NE, Suite 2200
(Mailing address)
Atlanta, GA 30326
(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 of authorized representative of a member)
Ernest J Davis
(Typed or printed name of signee)

Filing Fee: \$25.00

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