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COVER LETTER

TO:	Registration Section Division of Corporation		
SUBJE	CT:	Pattillo	lr

ndustrial Partners VIII, 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:

Ani Soghomonian

(Name of Person)

Mar-Gulf Management Co., Inc.

(Firm/Company)

15821 Ventura Blvd., Suite 635

(Address)

Encino, CA 91436

(City/State and Zip Code)

For further information concerning this matter, please call:

Ani Soghomonian

STREET/COURIER ADDRESS:

(Name of Person)

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

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

Pattillo Industrial Partners VIII, LLC
(Name of limited liability company)
Georgia
(Jurisdiction of its organization)
M1000001737
(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.
15821 Ventura Blvd., Suite 635
(Mailing address)
Encino, CA 91436
Encino, CA 91436 (City/State/Zip) (City/State/Zip) (City/State/Zip) (City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
Dui Enfluence
(Signature of member or authorized representative of a member)
Ani Soghomonian, Treasurer
(Typed or printed name of signee)

Filing Fee: \$25.00