Page 1 of 1

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 Phone : (850)222-1092

Fax Number : (850)878-5368

## LLC DISSOLUTION OR WITHDRAWAL NOMURA CDO 2007-2-ALLIANCE ES PALM GROVE, LLC

CBC 2007 2 HEBINITE	Z ED TIERNI GIC
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J. BRYAN

DEC 19 2011 12/16/2011 EXAMINER

## **COVER LETTER**

	sistration Section islon of Corporations			
SUBJECT:	NOMURA CDO 2007-2 ALLI			_
•	(Name of Fo	reign Limited Liability (	Company)	
Dear Sir or M	Andam:			
The enclosed	withdrawal and fee(s) are submitte	ed for filing.	•	
Please return	all correspondence concerning this	matter to the following		1
Robin Kyle				
	(Name of Person)	,		
C-III Asset M	Sanugemont LLC			
	(Firm/Company)		•	
5221 N. O'Co	onnor Blvd., Suite 600			
	(Address)			
Irving, TX 75	5039			
	(City/State and Zip Cod	(c)		
For further in	formation concerning this matter, p	olease call:		
Robin Kyle		at ( <sup>972</sup> )	868-5388	
	(Name of Person)		Daytimo Telephone Number)	_
	EET/COURIER ADDRESS:		ING ADDRESS:	
	stration Section sion of Corporations		ation Section n of Corporations	
	on Building		ox 6327	
	Executive Center Circle shasses, Florida 32301	Tallaha	ssee, Florida 32314	
Enclosed is a	check for the following amount:			
□ \$25 Filing	Foe S30 Filing Fee & Certificate of Starus	☐ \$55 Filing Fee & Certified Copy	13 \$60 Filing Fee, Certificate of Status & Certified Copy	

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

NOW DRAFT	CDO 2007-2 - ALLIANCE ES FALM GROVE, LLC
	(Name of limited liability company)
Delaware	The second secon
	(Jurisdiction of its organization)
W100000030	<u>1991</u>
	(Florida Document Number)
This limite authority to	ed liability company is no longer transacting business in Florida and surrendens its o transact business in this state.
This limite its behalf cause of ac	ed liability company revokes the authority of its registered agent to accept service on and appoints the Department of State as its agent for service of process based on a ction arising during the time it was authorized to transact business in Florida.
	5221 N. O'Connor Blvd., Suite,600
	(Mailing address)
	Irving, Texas 75039
	(City/State/Zip)
The limited change in h	d liability company agrees to notify the Department of State in the future of any its mailing address.
	Dung all
Signature	of member or authorized representative of a member)
Jenna Vick U	Jneil
Typed or t	printed name of signee)

Filing Fee: \$25.00