

**m10000004175**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : TRIAD PROFESSIONAL SERVICES, LLC  
Account Number : I20020000094  
Phone : (770) 777-2091  
Fax Number : (770) 220-1943

RECEIVED  
11 JUN 13 PM 1:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**LLC DISSOLUTION OR WITHDRAWAL  
COMVEST CAPITAL II PARTNERS UGP, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$55.00

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TALLAHASSEE, FLORIDA

**D. BRUCE**

JUN 14 2011

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**EXAMINER**

**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: COMVEST CAPITAL II PARTNERS UGP, 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:

Sharon K. Gray

(Name of Person)

Triad Professional Services, LLC

(Firm/Company)

1720 Windward Concourse, Ste. 390

(Address)

Alpharetta, GA 30005

(City/State and Zip Code)

For further information concerning this matter, please call:

Sharon K. Gray

(Name of Person)

at 770

(Area Code & Daytime Telephone Number)

777-2091

**STREET/COURIER ADDRESS:**

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

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TALLAHASSEE, FLORIDA

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

COMVEST CAPITAL II PARTNERS UGP, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

M10000004175

(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.

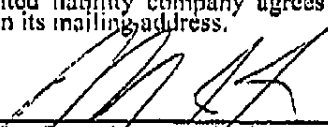
525 Okeechobee Boulevard, Ste. 1050

(Mailing address)

West Palm Beach, FL 33401

(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)

Michael S. Falk

(Typed or printed name of signee)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Filing Fee: \$25.00

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