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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 : (950)978-5368

LLC DISSOLUTION OR WITHDRAWAL JRSY PARTNERS LLC

Certificate of Status	0
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Page Count	03
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MAY - 7 2012

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5/4/2012

COVER LETTER

TO: Registration	n Section 'Corporations				
	•				
SUBJECT: JRSY	PARTNERS LLC (Name of Pol	reign Limited Linbility	Company)	** ***********************************	
Dear Sir or Madam:					
The enclosed withdo	awal and fee(s) are submitte	ed for filing.			
Please return all com	respondence concerning this	matter to the followin	8:		
John R. Reynoldson					
	(Name of Person)		_		
JRSY Partners LLC			_		
	(Firm/Company)				
4851 Tamiami Trail	North, Suite 302		_		
	(Address)				
Naples, Florida 3410	93			201 FAL	
·	(City/State and Zip Cod	le)	-	2 PA	٠
For further informati	ion concerning this matter, ;	oloase call:		BIZ MAY -4 SECRETARY	A CHACASA A
Robin Greenstein		et (^{2 2}	986-6000		
(N	une of Person)		t Daytime Telephone Number)	STATE	
Registration Division of Clifton Buil 2661 Execu	Corporations	Regis Divis P.O. 1	LING ADDRESS: tration Section from of Corporations Box 6327 hassee, Florida 32314	· · · · · · · · · · · · · · · · · · ·	
Enclosed is a check	for the following amount:				
□ \$25 Filing Fee	2 \$30 Filing Fee & Certificate of Status	Certified Copy	© \$60 Filing fee, Certificate of Status & Certified Copy		

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

JRSY PARTNERS ELC	
(Name of limited liability company)	
DELAWARE	
(Jurisdiction of its organization)	
(Florida Document Number)	
This limited liability company is no longer transacting business in Florida and authority to transact business in this state.	surrenders its
This limited liability company revokes the authority of its registered agent to access the behalf and appoints the Department of State as its agent for service of process cause of action arising during the time it was authorized to transact business in Flori	ot service on is based on a ida.
4851 Tamiami Trail North, Suite 302	
(Mailing address)	
Naples, Florida 34103	
(City/State/Zip)	2012 / SEC! FALL/
The limited liability company agrees to notify the Department of State in the change in its malling address.	
John R. Kallen	RY OF SEE, FL
(Signature of member or authorized representative of a member)	STATE LORID
John R. Reynoldson	
(Typed or printed name of signee)	▼

Filing Fee: \$25.00

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