

Division of Corporations

Page 1 of 1

**11100000073**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000079983 3)))



H120000799833ABCE

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 : VCORP SERVICES, LLC

Account Number : I20080000067

Phone : (845)425-0077

Fax Number : (845)818-3588

**LLC DISSOLUTION OR WITHDRAWAL  
SOULCYCLE POP UP, LLC**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 01      |
| Estimated Charge      | \$25.00 |

**FILED**  
12 MAR 27 AM 7:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**RECEIVED**

12 MAR 27 PM 3:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

**D. BRUCE**

MAR 28 2012

Help  
**EXAMINER**

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

**SOULCYCLE POP UP, LLC**

(Name of limited liability company)

**New York**

(Jurisdiction of its organization)

**M11000000073**

(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.

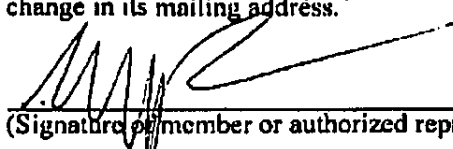
**103 Warren Street**

(Mailing address)

**New York, NY 10007**

(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)

**Elizabeth P. Cutler**

(Typed or printed name of signee)

**FILED**  
**12 MAR 27 AM 7:46**  
**SECRETARY OF STATE**  
**ALBANY, FLORIDA**

**Filing Fee: \$25.00**