

**M110000001407**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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12 MAR 13 PM 4:21

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12 MAR 13 AM 9:49

DEPARTMENT OF REVENUE  
TALLAHASSEE, FLORIDA

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS

MAR 15 2012

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 128806 5138497

AUTHORIZATION

*[Handwritten signature]*

COST LIMIT : \$25.00

ORDER DATE : March 13, 2012

ORDER TIME : 2:34 PM

ORDER NO. : 128806-005

CUSTOMER NO: 5138497

FOREIGN FILINGS

NAME: FUND IX - BLUE LAGOON LLC

XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF STATUS

CONTACT PERSON: Troy Todd - EXT# 2940

EXAMINER: \_\_\_\_\_

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Fund IX - Blue Lagoon 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:

Jennifer Savilonis  
(Name of Person)

TA Realty, LLC  
(Firm/Company)

28 State Street, 10th Floor  
(Address)

Boston, MA 02109  
(City/State and Zip Code)

For further information concerning this matter, please call:

Jennifer Savilonis at (617) 476-2797  
(Name of Person) (Area Code & Daytime Telephone Number)

**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:

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|--|---|--|--|

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

Fund IX - Blue Lagoon LLC

(Name of limited liability company)

DE

(Jurisdiction of its organization)

Fund IX - Blue Lagoon LLC

(Florida Document Number)

M110000001407

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.

28 State Street, 10th Floor

(Mailing address)

Boston, MA 02109

(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 A. Ruane

(Typed or printed name of signee)

**Filing Fee: \$25.00**

FILED  
12 MAR 13 AM 9:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA