Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

LLC DISSOLUTION OR WITHDRAWAL ZODIAC TITLE SERVICES LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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Y SULKER

COVER LETTER

TO: Registration Division of 0			
SUBJECT: Zodiac			100
	(Name of Fo	reign Limited Liability	Company)
Dear Sir or Madam:			
The enclosed withdraw	wal and fee(s) are submitte	ed for fliing.	
Please return all corre	spondence concerning this	matter to the following	, <u>, </u>
Yvonne Owe	ns		_
	(Name of Person)		
		_	,
Island Capital	Group LLC		
	(Firm/Company)	14177	•
300 N Main St.	, Ste 402		
· · · · · · · · · · · · · · · · · · ·	(Address)		
Greenville, SC	29601		
0.001171.101, 00	(City/State and Zip Cod	le)	•
For further information	n concerning this matter, p	lcase call:	·
Yvonne Owens	•		204 0007
		at (864) 331-0307 D dim Talahan Mahab
nuri)	ne of Person)	(Area Code &	Daytime Telephone Number)
<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>	OURIER ADDRESS:	MAII	ING ADDRESS:
Registration S		Registration Section	
Division of C	•	Division of Corporations	
Clifton Buildi	ing ve Center Circle	P.O. Box 6327 Tallahassee, Florida 32314	
Tallahassee, I		, griani	assee, 1 (0) (04 32314
Enclosed is a check fo	or the following amount:		·
□ \$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Copy

 $\tilde{\alpha}, \hat{\gamma}$

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Zodiac Title Services LLC		
(Name of limited liability company)		
Delaware		
(Jurisdiction of its organization)		
05/09/2011		
(Date registered with Florida Department of State)		,,
M11000002393		
(Florida Document Number)	- 表 B	•
This limited liability company is withdrawing its certificate of authority in this state.	SEE	£ 25.00
(Signature of authorized representative)	AM 99 38 FLORIDA	Pine.
Yvonne Owens		
(Typed or printed name of signee)		

Filing Fee: \$25.00