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(Red	questor's Name)				
(Address)					
(Address)					
(City/State/Zip/Phone #)					
P!CK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer:					
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SECRETARY OF STATE
TALLAHASSEE FLORID

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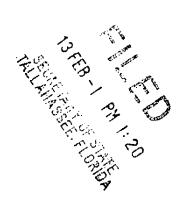
Office Use Only

ORION STATE LICENSING, INC.

January 20, 2013

VIA OVERNIGHT DELIVERY

ATTN: Registration Section Florida Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 (850) 245-6051



RE: BUREAUS INVESTMENT GROUP PORTFOLIO NO. 16, LLC APPLICATION FOR WITHDRAWAL OF FOREIGN LIMITED LIABILITY COMPANY

Dear Sir or Madam:

Enclosed please find herewith for filing, the following items on behalf of the above-referenced entity:

- 1. Application for Withdrawal of Foreign Limited Liability Company
- 2. Company check made payable to "Florida Dept. of State" in the amount of \$25.00 for the filing fee

Please return the filed documents to: 155 N. Riverview Drive, Anaheim Hills, CA 92808

Thank you for your assistance in this matter. If you have any questions or require further information in order to process this request, please do not hesitate to contact me via email to janet@orionlicensing.com or at the office (888) 315-0805.

Very truly yours,

ORION STATE LICENSING, INC.

Janet/J. Lopez

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COVER LETTER

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TO: Registration Division of 0	Section Corporations			A Company of the Comp
SUBJECT: Bureau	is Investment Group Port	folio No. 16, LLC		A STATE OF THE STA
SCHOLCT.	(Name of For	eign Limited Liability C	Company)	THE CONTRACTOR OF THE PARTY OF
Dear Sir or Madam:				
The enclosed withdra	awal and fec(s) are submitted	d for filing.		
Please return all corre	espondence concerning this	matter to the following:		E
Janet Lopez				
	(Name of Person)			
Orion State Licens	<u> </u>			Ì
	(Firm/Company)			
155 N. Riverview	Drive			į
	(Address)			'
Anaheim, CA 928	08			
	(City/State and Zip Cod	e)		
For further information	on concerning this matter, p	lease call:		i
Janet Lopez		at (888	315-0805	
(Na	ame of Person)	· · · · · · · · · · · · · · · · · · ·	Daytime Telephone Number)	
Registration Division of Clifton Buil 2661 Execu	Corporations	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	