## M13000004837

| (Requ                                   | estor's Name)  |             |  |  |
|---|----------------|-------------|--|--|
| (Addre                                  | ess)           |             |  |  |
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| (City/S                                 | State/Zip/Phon | e #)        |  |  |
| PICK-UP                                 | ☐ WAIT         | MAIL        |  |  |
| (Busir                                  | ness Entity Na | me)         |  |  |
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## COVER LETTER . . .

|  | ration Section<br>on of Corporations        |   |   |  |
|--|---|---|---|--|
| SUBJECT:   | X Funding LLC                               |   |   |  |
| (Name of Foreign Limited Liability Company)  |   |   |   |  |
| Dear Sir or Ma   | dam:  |   |   |  |
| The enclosed v   | rithdrawal and fee(s) are submitted         | l for filing.   |   |  |
| Please return a  | l correspondence concerning this            | matter to the following:  |   |  |
| Eric Chass   | er  |   |   |  |
|  | (Name of Person)                            |   |   |  |
| Metropolita  | n Equity Partners, LLC                      |   |   |  |
| <del> </del>   | (Firm/Company)                              |   |   |  |
| 70 East 55   | th Street, 15th Floor                       |   |   |  |
|  | (Address)                                   |   |   |  |
| New York,  | NY 10022                                    |   |   |  |
|  | (City/State and Zip Cod                     | e)  |   |  |
| For further inf  | ormation concerning this matter, p          | lease call:   |   |  |
| Eric Chass   | er  | at 212  | 561-1252<br>Daytime Telephone Number)                           |  |
|  | (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:             |   |   |  |
| ■ \$25 Filing  | Fee \$30 Filing Fee & Certificate of Status | □ \$55 Filing Fee & Certified Copy  | ☐ \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |  |

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

| CX Funding LLC  | •           |
|---|-------------|
| (Name of limited liability company)   |             |
| Delaware  |             |
| (Jurisdiction of its organization)  | <del></del> |
| August 2, 2013  |             |
| (Date registered with Florida Department of State)  |             |
| M13000004837  |             |
| (Florida Document Number)   |             |
| This limited liability company is withdrawing its certificate of authority in this state. |             |
| Zman  |             |
| (Signature of authorized representative)  | town 5 gri  |
| Eric D. Chasser   | 量3円         |
| (Typed or printed name of signee)   | - PH 2: 3   |

Filing Fee: \$25.00