

MIT 600026095

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
15 DEC 10 AM 8:39  
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J SHIVERS

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Crossroad Capital Management, 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:

Gary Kay  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

2080 NW Boca Raton Blvd Ste 4  
(Address)

Boca Raton, FL 33431  
(City/State and Zip Code)

For further information concerning this matter, please call:

Gary Kay at (561) 287-4650  
(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, Certificate of Status & Certified Copy

**NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY**

Crossroad Capital Management, LLC

(Name of limited liability company)

DE

(Jurisdiction of its organization)

09/25/13

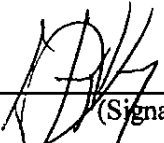
(Date registered with Florida Department of State)

M13000006095

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

ⓧ



(Signature of authorized representative)

Gary Kay

(Typed or printed name of signee)

15 DEC 10 AM 8:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

Filing Fee: \$25.00