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## COVER LETTER

TO: Registration Section Division of Corporations		
NW EVERGREEN OPPOF	RTUNITIES IV, L	LC
	eign Limited Liability	Company)
Dear Sir or Madam:		
The enclosed withdrawal and fee(s) are submitted	d for filing.	
Please return all correspondence concerning this	matter to the following	g:
MIKE PARTHASARATHY		
(Name of Person)		_
NW EVERGREEN OPPORTUNITIES	S IV, LLC	
(Firm/Company)		_
2250 NW FLANDERS ST #G02		
(Address)		_
PORTLAND, OR 97210		
(City/State and Zip Code	e)	-
For further information concerning this matter, pl	lease call:	
MIKE PARTHASARATHY	503	573-8312
(Name of Person)		& Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Regi Divis P.O.	ELING ADDRESS: stration Section sion of Corporations Box 6327 thassee, Florida 32314
Enclosed is a check for the following amount:		
■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Copy

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

NW EVERGREEN OPPORTUNITIES IV, LLC
(Name of limited liability company)
OREGON
(Jurisdiction of its organization)
DECEMBER 2013
(Date registered with Florida Department of State)
M1300007887
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
(Signature of authorized representative)  MIKE PARTHASARATHY
(Typed or printed name of signee)

Filing Fee: \$25.00

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