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MAY 0 5 2015 S. YOUNG

TO:

	gistration vision of (Section Corporations		
SUBJECT:		Retail Equity Partner		
		(Name of For	eign Limited Liability C	Company)
Dear Sir or l	Madam:			
The enclosed	d withdra	wal and fee(s) are submitted	for filing.	
Please return	n all corre	spondence concerning this	matter to the following:	
		Kathleen M. La Rock		
		(Name of Person)		
		Clark Hill PLC		
		(Firm/Company)		
	200	Ottawa Ave., NW, Ste. 500		
<u></u>		(Addresa)		
	G	rand Rapids, MI 49503		
		(City/State and Zip Cod	e)	
For further i	informatio	on concerning this matter, p	lease call:	·
	Kathleer	ı La Rock	at (616) 608-1117
•	(Na	me of Person)	(Area Code &	Daytime Telephone Number)
		OURIER ADDRESS:	MAILING ADDRESS:	
	gistration	Section Corporations	Registration Section Division of Corporations	
	ifton Build	_	P.O. Box 6327	
260	61 Execut	tive Center Circle Florida 32301		assee, Florida 32314
Enclosed is	a check	for the following amount:		
M \$25 Filin	g 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

Retail Equity Partners, LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
February 24, 2014
(Date registered with Florida Department of State)
M14000001263
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
hide W. Way
(Signature of authorized representative)
Michael W. Ward
(Tymod or printed home of signes)

Filing Fee: \$25.00

FILED
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