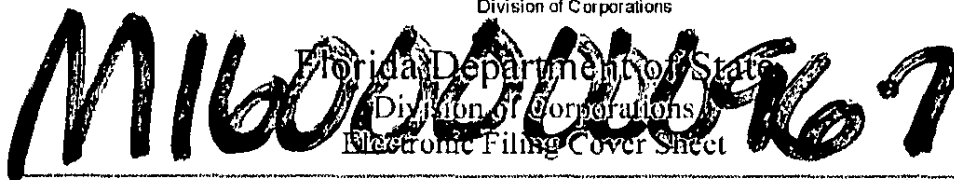


5/2/2017

Division of Corporations



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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (512)418-6949
Fax Number : (954)208-0845

**LLC DISSOLUTION OR WITHDRAWAL
PROLOGUE CAPITAL MANAGEMENT II, LLC**

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Prologue Capital Management II, 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:

Graham Walsh

(Name of Person)

Prologue Capital Management II, LLC

(Firm/Company)

1000 5th Street, Suite 1306

(Address)

Miami Beach, FL 33139

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael L. Cifelli

(Name of Person)

617

at ()

832-1766

(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

Prologue Capital Management II, LLC
(Name of limited liability company)

Delaware
(Jurisdiction of its organization)

February 4, 2016
(Date registered with Florida Department of State)

M16000000967
(Florida Document Number)

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


(Signature of authorized representative)

Graham Walsh, Manager
(Typed or printed name of signee)

17 MAY -2 AM 6:34

Filing Fee: \$25.00