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SECRETARY OF STATE ALLAHASSEE, FLORIDA

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJE	· <u> </u>		
	(Name of For	eign Limited Liability (Company)
Dear Si	or Madam:		
The enc	losed withdrawal and fee(s) are submitte	d for filing.	
Please r	eturn all correspondence concerning this	matter to the following	;
Carol	Ann Bowman		
	(Name of Person)		
White	Lodging Services Corporatio (Firm/Company)	n, Manager	
1000	East 80th Place, Suite 700 N	North	
	(Address)		
Merril	lville, Indiana 46410		
	(City/State and Zip Cod	le)	
For furt	her information concerning this matter, p	please call:	
Carol	Ann Bowman	at (219	757-3511
	(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	Regist Divisio P.O. B	AING ADDRESS: ration Section on of Corporations fox 6327 assee, Florida 32314
Enclose	d is a check for the following amount:		
□\$25 I	Filing Fee \$\sum \text{\$\sum \$\sum \$\sum \$\sum \$\text{S30 Filing Fee & } \text{Certificate of Status}\$	\$55 Filing Fee & Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

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CTY-Brand, L.L.C.
(Name of limited liability company)
Indi <i>a</i> na
(Jurisdiction of its organization)
This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.
This limited liability company revokes the authority of its registered agent to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business in Florida.
1000 East 80th Place, Suite 700 North (Mailing address) Merrillville, Indiana 46410
Merrillville. Indiana 46410
(City/State/Zip)
The limited liability company agrees to notify the Department of State in the future and change in its mailing address.
OluSecci
(Signature of member or authorized representative of a member) Branman Corp., Manager
Carol Ann Bowman, Vice President
(Typed or printed name of signee)

Filing Fee: \$25.00