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## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Colony Brickell Genpar, LLC		
(Name of Foreign Limited I	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:	
Joy Mallory (Name of Person)		
(Name of Ferson)		
Colony Advisors, LLC	—— TALS 2	
(Firm/Company)	ECR LLA	Charge Charge
1999 Avenue of the Stars, Suite 1200	FEB -5 RETARY AHASSEE	
(Address)	E P	
Los Angeles, California 90067		
(City/State and Zip Code)	1: 52 TATE ORIDA	
For further information concerning this matter, please call:		
Joy Mallory at ( 3	10 282-8820	
	ea 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 \$\times \$30 Filing Fee & \$55 Filing Certified C		

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

Colony Brickell Genpar, LLC

(Name of limited liability company)
Delaware
(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.
1999 Avenue of the Stars, Suite 1200 (Mailing address)
Los Angeles, California 90067  (City/State/Zip)  Los Angeles, California 90067  (City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of the future of the change in its mailing address.
(Signature of member or authorized representative of a member)
V Loy Mallory
(Typed or printed name/of signee)

Filing Fee: \$25.00