

M980000055

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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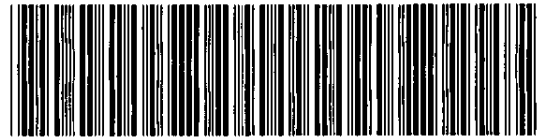
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATE
15 JUN 23 PM 3:05
REGISTRATION
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 24 2015
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DATE:

6/23/15

NAME:

COCHRAN FAMILY INVESTMENT PARTNERSHIP, L.L.C.

TYPE OF FILING: WITHDRAWAL

COST: 25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: COCHRAN FAMILY INVESTMENT PARTNERSHIP, L.L.C.
(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:

Paul Foreman

(Name of Person)

Chuhak & Tecson, P.C.

(Firm/Company)

30 S. Wacker Drive, Suite 2600

(Address)

Chicago, Illinois 60606

(City/State and Zip Code)

For further information concerning this matter, please call:

Paul Foreman

(Name of Person)

at (312) 855-4601
(Area Code & Daytime Telephone Number)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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

COCHRAN FAMILY INVESTMENT PARTNERSHIP, L.L.C.
(Name of limited liability company)

Illinois
(Jurisdiction of its organization)

09/18/1998
(Date registered with Florida Department of State)

M98000001055
(Florida Document Number)

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


(Signature of authorized representative)

George Cochran, Manager
(Typed or printed name of signee)

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TALLAHASSEE, FLORIDA

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Filing Fee: \$25.00