



February 27, 2007

Department of State
Div. of Corp/Reg Section
P.O. Box 6327
Tallahassee, FL 32314

Re: Cancellation of LLC

To Whom It May Concern:

Enclosed please find a completed Withdrawal of Authority to Transact Business in Florida for Ceruzzi Properties LLC and a check for the \$25 fee.

If you have any questions, please contact me at my office.

Sincerely,

A handwritten signature in black ink, appearing to read "Aaron E. Kosakowski".

Aaron E. Kosakowski
Manager

Enclosure

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 MAR -5 AM 8:49

CERUZZI HOLDINGS LLC

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ceruzzi Properties 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:

Aaron E. Kosakowski
(Name of Person)

Ceruzzi Properties LLC
(Firm/Company)

1720 Post Road
(Address)

Fairfield CT 06824
(City/State and Zip Code)

For further information concerning this matter, please call:

Aaron E. Kosakowski at (203) 256 -4000
(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

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 MAR -5 AM 8:49

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

Ceruzzi Properties LLC

(Name of limited liability company)

DE

(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.


1720 Post Road

(Mailing address)

Fairfield CT 06824

(City/State/Zip)

The limited liability company agrees to notify the Department of State in the future ~~of~~ any change in its mailing address.



(Signature of member or authorized representative of a member)

Aaron E. Kosakowski

(Typed or printed name of signee)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 MAR 25 AM 8:49

Filing Fee: \$25.00