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(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
, , , , ,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer
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SECRETARY OF STATE
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ON SERVICE COMPANY			·	E E
ACCOUNT N	0. :	07210000	0032	7555
REFEREN	CE :	877016	4804909	C. E. C.
AUTHORIZATI	ON :	Land	Salama	ORIE
COST LIM	IT :	\$ 25.00		y
ORDER DATE : May 1, 2007				
ORDER TIME : 2:45 PM				
ORDER NO. : 877016-005				
CUSTOMER NO: 4804909				
FOREIG	N FILI	<u>INGS</u>		
NAME: TAUBMAN-DO ASSOCIATES		MALL		,
CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COM	P ANY			
XXXX WITHDRAWAL/CANCELLATIO	N			
PLEASE RETURN THE FOLLOWING	AS PR	OOF OF FI	LING:	
CERTIFIED COPY XX PLAIN STAMPED COPY		•		
CERTIFICATE OF STATE	US			

EXAMINER:

CONTACT PERSON: Susie Knight - EXT# 2956

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

WILLIAM	FLORIDA	SINESS IN TARE OF THE PROPERTY
Taubman-Dolphin I	Mall Associates LLC	SSE
	(Name of limited liability company)	Exp
Delaware		10 × 36
	(Jurisdiction of its organization)	70 P

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.

200 E Long Lake Ro	ad				
(Mailing address)					
Bloomfield Hills	Mi	48304			
	(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)

Lee Ann Provenzano, Authorized Representative

(Typed or printed name of signee)

Filing Fee: \$25.00