

M99000001840

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

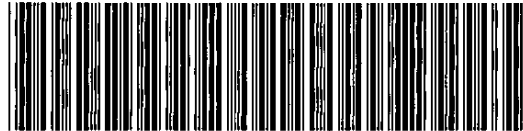
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900111326529

FILED
08 JAN -4 PM 3:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2008 JAN -4 AM 8:42
NOTIFIED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

B. KOHR

JAN 04 2008

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 386420 8027A

AUTHORIZATION :

COST LIMIT : \$ 55.00

FILED
08 JAN -4 PM 3:14
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

ORDER DATE : January 3, 2008

ORDER TIME : 5:01 PM

ORDER NO. : 386420-040

CUSTOMER NO: 8027A

FOREIGN FILINGS

NAME: TAUBMAN-IVANHOE LLC

☐ CORPORATE
☐ LIMITED PARTNERSHIP
☒ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☒ CERTIFIED COPY
☐ PLAIN STAMPED COPY
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Susie Knight - EXT# 2956

EXAMINER: _____

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

Taubman-ivanhoe 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.

200 East Long Lake Road


(Mailing address)

Bloomfield Hills, MI 48304

(City/State/Zip)

This filing is effective as of January 8, 2008.

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)

Chris B. Heaphy, authorized representative

(Typed or printed name of signee)

FILED
08 JAN - 4 PM 3:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00