

P32093

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

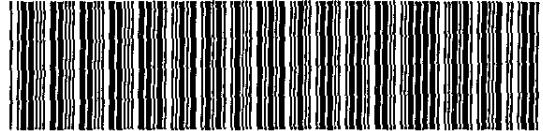
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

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Phokawa



THE BERKSHIRE GROUP

Legal Department

VIA FEDERAL EXPRESS

June 16, 2003

State of Florida  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

Re: Krupp GP, Inc.

Dear Sir/Madam:

With respect to the above-referenced entity, I am enclosing the following for filing with your office:

1. Two original Applications by Foreign Corporation for Withdrawal of Authority to Transact Business or Conduct Affairs in Florida;
2. Our check in the amount of \$35.00 to cover the filing fee for said application; and
3. A Stamped, self-addressed envelope for your convenience in returning to our office a date stamped copy of the Application.

Thank you for your courtesy and cooperation in this matter.

Very truly yours,

*Laura Merry*  
Laura Merry  
Legal Assistant

LJM/hs  
Enclosures

cc: Mary Beth Bloom, Esq.

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL  
OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS  
IN FLORIDA

\_\_\_\_\_  
KRUPP GP, INC.  
(Name of Corporation)

\_\_\_\_\_  
MASSACHUSETTS

(Incorporated Under Laws Of)

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida 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 or conduct affairs in Florida.

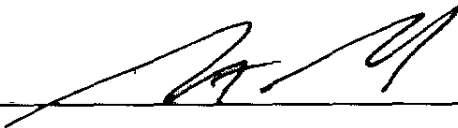
The following is a current mailing address for the corporation:

\_\_\_\_\_  
c/o The Berkshire Group, One Beacon Street, Suite 1500, Attn: Legal Department  
(Mailing Address)

\_\_\_\_\_  
Boston, Massachusetts 02108

(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

\_\_\_\_\_  


\_\_\_\_\_  
Secretary

Title

\_\_\_\_\_  
Scott D. Spelfogel

Typed or printed name

\_\_\_\_\_  
6/5/03  
Date

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

03 JUN 17 AM 10:57

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