

MO2000001696

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 205-8842
Fax Number : (850) 878-5368

**LLC DISSOLUTION OR WITHDRAWAL
INLAND 200 CELEBRATION PLACE, L.L.C.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

RECEIVED

15 AUG 19 AM 10:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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15 AUG 19 AM 7:18

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8/19/2015 9:42:37 AM From: To: 8506176383(2/3)

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Inland 200 Celebration Place, 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:

Beth Sprecher Brooks

(Name of Person)

Inland 200 Celebration Place, L.L.C.

(Firm/Company)

2901 Butterfield Road

(Address)

Oak Brook, IL 60523

(City/State and Zip Code)

For further information concerning this matter, please call:

Sherry Dietz

(Name of Person)

at (630) 218.8000
(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

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Inland 200 Celebration Place, L.L.C.

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

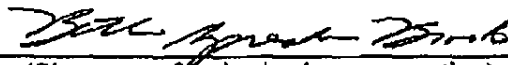
June 27, 2002

(Date registered with Florida Department of State)

M02000001696

(Florida Document Number)

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



(Signature of authorized representative)

Beth Sprecher Brooks, Senior Vice President

(Typed or printed name of signee)

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15 AUG 19 AM 7:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00