MD600003602

(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Codifical Conics Codificatos of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600302887446

08/24/17--01001--004 **175.00



2017 Aug 23 FN 3: 44

D. SCOTT AUG 2 4 2017

SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive

Tallahassee, Florida 32312

(850) 656-4724

DATE 8-23-17

	WALK EV	
ENTITY NAME	CHMB FLORIDA HOTEL INVESTORS, LL	
DOCUMENT N	UMBER Natalie @ Paranet	
	PLEASE FILE THE ATTACHED AND RETURN	
<u> </u>	Plain Copy	
·	Certified Copy	
	Certificate of Status	7 7 7
	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY	
	Certified Copy of Arts & Amendments	
	· Certificate of Good Standing	
	APOSTILLE' / NOTARIAL CERTIFICATION	
	COUNTRY OF DESTINATIONNUMBER OF CERTIFICATES REQUESTED	
TOTAL \$ OWED	<u>25.00.</u> 3996	

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

	gistration Section vision of Corporations			
	CHMB FLORIDA HOTEL INVE	STORS, LLC		
SUBJECT	(Name of Fo	reign Limited Liability	Company)	
Dear Sir or	Madam:			
The enclose	ed withdrawal and fee(s) are submitte	ed for filing		
Please retu	n all correspondence concerning this	s matter to the followir	g:	
MR. RON	COOPER - CORPORATE CONTR	OLLER		
	(Name of Person)		_	
CHARTW	ELL HOSPITALITY, LLC		_	
	(Firm/Company)			
5000 MER	IDIAN BLVD., SUITE 750		_	
	(Address)			
FRANKL!	N, TN 37067			
	(City/State and Zip Co	de)		
For further	information concerning this matter,	please call:		13 17
NATALIE	LEIBA-PAUL	800 at (277-9977	
	(Name of Person)	(Area Code	& Daytime Telephone Number	- 1
Re D C 20	FREET/COURIER ADDRESS: egistration Section ivision of Corporations lifton Building 661 Executive Center Circle allahassee, Florida 32301	Reg Divi P.O	ILING ADDRESS: stration Section sion of Corporations Box 6327 ahnssec, Florida 32314	
Enclosed i	s a check for the following amount	t:		
■ \$2 5 Fili	ng Fee S30 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

CHMB FLORIDA HOTEL INVESTORS, LLC		
(Name of limited liability company)		•
DELAWARE		
(Jurisdiction of its organization)		,
JUNE 27, 2006		
(Date registered with Florida Department of State)		
M06000003602		
(Florida Document Number)		
This limited liability company is withdrawing its certificate of authority in this state.		
Effective Date, if other than the date of filing:	juirements,	
(Signature of authorized representative)		
RONALD COOPER)	
(Typed or printed name of signee)		1 -
	•• :	٠
	<i>√</i> >	
	• • • • • • • • • • • • • • • • • • • •	

Filing Fee: \$25.00