

MO7000001942

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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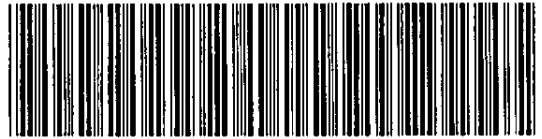
(Business Entity Name)

(Document Number)

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DATE: 1/26/16

NAME: BRICKELL KEY CENTER GP, LLC

TYPE OF FILING: WITHDRAWAL

COST: 55.00

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Brickell Key Center GP, 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:

Jessica Iburg

(Name of Person)

Brickell Key Center GP, L.L.C.

(Firm/Company)

c/o Tishman Speyer - 45 Rockefeller Plaza - 7th Floor

(Address)

New York, NY 10111

(City/State and Zip Code)

For further information concerning this matter, please call:

Jessica Iburg

(Name of Person)

212

at ()

715-0389

(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

Brickell Key Center GP, L.L.C.

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

April 3, 2007

(Date registered with Florida Department of State)

M07000001942

(Florida Document Number)

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

Michael B Benner

(Signature of authorized representative)

Michael B. Benner

(Typed or printed name of signee)

FILED
JAN 26 AM 8:37
TALLAHASSEE, FLORIDA

16 JAN 26 AM 8:37

Filing Fee: \$25.00