MILOCOSSII

(Re	questor's Name)					
(Ada	dress)					
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(Cit	y/State/Zip/Phone	#)				
PICK-UP	MAIT	MAIL				
(Bu	siness Entity Nam	ne)				
(Document Number)						
Certified Copies	Certificates	of Status				
Special Instructions to Filing Officer:						

Office Use Only



800302415018

2017 AUG 14 PN 2: 09

D SCOTT AUG 1 5 2017 CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 765551

AUTHORIZATION :

COST LIMIT : \$ 25

ORDER DATE : August 14, 2017

ORDER TIME : 12:48 PM

ORDER NO. : 765551-130

CUSTOMER NO: 7775081

FOREIGN FILINGS

NAME: HCRI SUN TWO POOL ONE, LLC

_ CORPORATE LIMITED PARTNERSHIP

XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

___ CERTIFIED COPY XX PLAIN STAMPED COPY ____ CERTIFICATE OF STATUS

CONTACT PERSON: Melissa Zender - EXT#

EXAMINER:

COVER LETTER

TO:		stration S sion of C	ection orporations					
SUBJE		HCRIS	Sun Two Pool One,	LLC				
SOBIL	·1		(Name of Fo	eign Limited Liab	ility C	iompany)		
Dear Si	r or M	adam:						
The enc	losed	withdraw	al and fee(s) are submitte	d for filing.				
Please r	eturn :	all corres	pondence concerning this	matter to the follo	wing:			
Auror	a Ku	пth						
			(Name of Person)					
Wellto	ower	Inc.						_
			(Firm/Company)				<u></u> :::	17
4500	Dorr	Street						11 90°
			(Address)					
Toled	o, O	H 4361	5					လု
			(City/State and Zip Cod	e)				01
For furt	her int	ormation	concerning this matter, p	lease call:				
Auror	a Ku	лth		419 at (1	247-5724		
*****		(Nam	e of Person)	(Area Co	rde &	Daytime Telephone Number)		
	Regis Divis Clifto 2661	stration S sion of Co on Buildi Executiv	orporations	R C P	legistr Divisio .O. Be	ING ADDRESS: ration Section on of Corporations ox 6327 assee, Florida 32314		
Enclose	ed is a	check fo	or the following amount:					
□ \$ 25 l	Filing	Fee	□ \$30 Filing Fee & Certificate of Status	S55 Filing Fee Certified Cop		☐ \$60 Filing Fee, Certificate of Status & Certified Copy		

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

HCRI Sun Two Pool One, LLC	
(Name of limited liability company)	
Delaware	
(Jurisdiction of its organization)	
10/24/2011	
(Date registered with Florida Department of State)	.
M1100005311	
(Florida Document Number)	
This limited liability company is withdrawing its certificate of authority in this sta	ite.
Docusigned by: Outry 10 Costs E9881EFF1E40425 (Signature of authorized representative)	_
Tracy W. Carte, Authorized Signatory	
(Typed or printed name of signee)	
	17 A

Filing Fee: \$25.00