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2016-11-04 07:10:46 EST

19542080845 From: Elnae McGraw

M12000005160

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the tax audit number (shown below) on the top and bottom of all pages of the document.

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

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

**LLC DISSOLUTION OR WITHDRAWAL
GTP STRUCTURES V, LLC**

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

FILED
16 NOV -4 AM 10:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2016 NOV -4 AM 9:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GTP Structures V, LLC
(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:

(Name of Person)

(Firm/Company)

(Address)

(City/State and Zip Code)

For further information concerning this matter, please call:

_____ at (_____) _____
(Name of Person) (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

GTP Structures V, LLC
(Name of limited liability company)

Delaware
(Jurisdiction of its organization)

09/13/2012
(Date registered with Florida Department of State)

M12000005160
(Florida Document Number)

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

Ruth Dowling
(Signature of authorized representative)

Ruth Dowling
(Typed or printed name of signee)

FILED
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STATEMENT OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00