

From:

11/08/2017 19:10

#818 P.003/004

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AAF PABS Borrower 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:

Attn: Legal Department

(Name of Person)

(Firm/Company)

2855 Le Jeune Rd., 4th Floor

(Address)

Coral Gables, FL 33134

(City/State and Zip Code)

For further information concerning this matter, please call:

Jessica Perez

(Name of Person)

305 520-2366

at (_____) _____
(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

AAF PABS Borrower LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

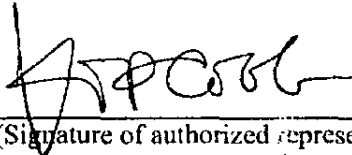
9/25/2015

(Date registered with Florida Department of State)

M15000007696

(Florida Document Number)

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



(Signature of authorized representative)

Kolleen Cobb, Vice President

(Typed or printed name of signer)

Filing Fee: \$25.00

FILED
17 NOV -8 AM 8:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA