

From:

04/13/2018 16:53

#851 P.001/003

Mile000008543

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

From: Account Name : FLAGLER DEVELOPMENT GROUP,
Account Number : 120020000144
Phone : (305)520-2344
Fax Number : (305)520-2400

LLC DISSOLUTION OR WITHDRAWAL
PARCEL 10A/10B LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

FILED
2018 APR 13 AM 8:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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APR 16 2018
J. HARRIS

From:

04/13/2018 16:53

#851 P.002/003

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Parcel 10A/10B 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)

at (305) 520-2366
(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

Parcel 10A/10B LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

10/27/2016

(Date registered with Florida Department of State)

M16000008543

(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 signee)

2018 APR 13 AM 8:38
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

Filing Fee: \$25.00