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## LLC DISSOLUTION OR WITHDRAWAL BRICKELL AVENUE PROJECT OWNER LLC

Certificate of Status	1
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## **COVER LETTER**

	egistration ivision of	n Section Corporations		
SUBJECT	Bricke	ell Avenue Project Owner L		
		(Name of For	reign Limited Liability	Company)
Dear Sir or	Madam:			
The enclos	ed withdr	awal and fee(s) are submitte	ed for filing.	
Please retu	m all con	espondence concerning this	matter to the following	g:
Steven M. I	Lutt			
		(Name of Person)		•
White & C	ase LLP			
		(Firm/Company)		~
1155 Aver	ue of the			_
		(Address)		
New York	NY 1003	36-2787		_
		(City/State and Zip Cod	c)	
For further	informati	on concerning this matter, p	olease call:	
Katie Adle	r		at (212	819-2614
	(N.	ame of Person)	(Area Code d	& Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section		MAILING ADDRESS: Registration Section		
Division of Corporations Clifton Building		Division of Corporations P.O. Box 6327		
26	61 Execu	tive Center Circle , Florida 32301	Tullahussee, Florida 32314	
Enclosed is	s a check	for the following amount:		
□ \$25 Fili	ng Fee	\$30 Filing Fee & Certificate of Status	Certified Copy	Section Status & Certificate of Status & Certified Copy

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

Brickell Avenue Project Owner LLC		
(Name of limited liability company)		
Delaware/ USA		
(Jurisdiction of its organization)		
M09000004854		
(Florida Document Number)		
This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.		
This limited liability company revokes the authority of its registered agent to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business in Florida.	TO OCT	7
c/o Mathew John, CPA, 295 Medison Ave., 43rd Floor	9	
(Mailing address)	<b>)</b>	Ш
<b>○</b> ~;	<b>=</b>	0
	<del>,</del>	
(City/State/Zip)	71	
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.		
(Signature of member or authorized representative of a member)		
Markey ( (m. Laden) a Disease SYIO Deal Description of Language Sylio Deal Description		
Mathew John, Authorized Person of US Real Property Investments Inc.		

Filing Fee: \$25.00