Korida Department of State & Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name

: CORPORATION SERVICE COMPANY

Account Number : 120000 Phone : (850)5

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DISSOLUTION OR WITHDRAWAL KEY WEST OPERATING LESSEE INC.

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COVER LETTER

	ment Section a of Corporations
SUBJECT: K	Ley West Operating Lessee, Inc.
	(Name of Corporation)
DOCUMENT	NUMBER: F05000004584
The enclosed w	ithdrawal application and fee are submitted for filing.
Please return al matter to the fo	l correspondence concerning this llowing:
Britta	ny Cohan
	(Name of Person)
Simp	son Thacher & Bartlett
	(Firm/Company)
425 I	Lexington Avenue
	(Address)
New	York, NY 10017
- · · · · · · · · · · · · · · · · · · ·	(City/State and Zip code)
Fo r furthe r info	rmation concerning this matter, please call:
Brittany Coh	(Name of Person) at (212) 455-3199 (Area Code & Daytime Telephone Number)
	Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

MAILING ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

Key West Operating Lessee Inc.	
(Name of Corporation)	W.
F05000004584	12 MA
(Document Number of Corporation (if known)
Delaware	
(Incorporated Under Laws o	
This corporation is no longer transacting business or conducting at voluntarily surrenders its authority to transact business or conduct a	
This corporation revokes the authority of its registered agent in appoints the Department of State as its agent for service of process time it was authorized to transact business or conduct affairs in Flor	based on a cause of action arising during the
The following is a current mailing address for the corporation:	
501 East Camino Real	
(Mailing Address)	
Boca Raton FL, 33432	
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the future	rc of any change in its mailing address.
(Signature of a director, president or other officer if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
David Hirsh	Managing Director and Vice President
(Typed or printed name of person signing)	(Title of poison signing)

FILING FEE \$35