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Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)205-8842 Fax Number

DISSOLUTION OR WITHDRAWAL

STARWOOD HOTELS & RESORTS MANAGEMENT COMPANY, INC.

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JUL O \$ 2016 C MCNAIR

7/5/2016 3:31:32 PM From: To: 8506176380( 2/3 )



## **COVER LETTER**

Registration Section Division of Corporations TO:

SUBJECT: Starwood Hotels & Resorts Management Company, LLC

Name of Limited Liability Company					
	enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certifica stence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.				
Please return all correspondence concerning this	matter to the following:				
		•			
	Name of Person	· ·			
CT Corporation System	₹.	· · · · · · · · · · · · · · · · · · ·			
<del></del>	Firm/Company				
155 Federal Street, Suite 700		•			
	Address				
Boston, MA 02110	·				
	City/State and Zip Cod	ė .			
ginger.sytsma@starwoodhotels.com	•				
E-mail addres	ss: (to be used for future annua	al report notification)			
For further information concerning this matter, pl	lease call:	·			
	at (	)			
Name of Contact Perso	On Area Code	Daytime Telephone Number			
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a check for the following amount:  El \$125.00 Filing Fee					

FL057 - 09/10/2015 C T Filing Manager Online

Starwood Hotels & Resorts Management Company, Inc.

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

(N	lame of Corporation)
	Imber of Corporation)  Imported Under Laws of)
F06000000765	
(Document Nu	imber of Corporation (if known)
	ن المسلم الم
Delaware	
(Incor	rporated Under Laws of)
One StarPoint	•
(	(Mailing Address)
Stamford, CT 06902	
	(City/ State /Zip)
	•
corporation agrees to notify the Department	t of State in the future of any change in its mailing address.  June 30, 2016
(Signature of a director, president of other officer if i receiver or other court appointed fiduciary, by that fi	
receiver or other count appointed fiduciary, by that fi	īduciary)
Marshall J. Donat	Vice President & Assistant Secretary
(Typed or printed name of person signing)	(Title of person signing)