| (Requestor's Name)                       |   |  |  |
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| PICK-UP WAIT MAIL                        |   |  |  |
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| (Business Entity Name)                   |   |  |  |
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| Certified Copies Certificates of Status  | _ |  |  |
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| Special Instructions to Filing Officer:  |   |  |  |
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Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500 ·

ACCOUNT NO. : I2000000195

REFERENCE : 853606

AUTHORIZATION

COST LIMIT

ORDER DATE: October 29, 2015

ORDER TIME : 4:06 PM

ORDER NO. : 853606-005

CUSTOMER NO: 4351991

## FOREIGN FILINGS

NAME: RADISSON BALTIMORE EMPLOYER

LLC

CORPORATE LIMITED PARTNERSHIP XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY XX PLAIN STAMPED COPY \_\_\_\_ CERTIFICATE OF STATUS

CONTACT PERSON: Melissa Zender - EXT# 62956

EXAMINER:

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

| Radisson Bal                                      | timore Employer LLC   |   |         |
|---|---|---|---------|
| <del>, , , , , , , , , , , , , , , , , , , </del> | (Name of limited liability company)   | ······································                      |         |
| Minnesota   |   |   |         |
|   | (Jurisdiction of its organization)  |   |         |
| January 17, 2                                     | 002   |   |         |
| ·   | (Date registered with Florida Department of State)                              |   | <u></u> |
| M020000001  | 53  |   |         |
|   | (Florida Document Number)   |   |         |
| This limited lia                                  | bility company is withdrawing its certificate of authority i                    | n this state.   |         |
|   | (Signature of authorized representative)  James H. Peterson, Vice President-Tax | <del>,</del>  |         |
| •   | (Typed or printed name of signee)   |   |         |
|   |   | 2015 OCT 30 P 4: 00 SECRETARY OF STATE TALLAHASSEE, FLORIDA | TILED   |

Filing Fee: \$25.00