## Maaaaa1657

| -                                       | _           |  |  |  |
|---|-------------|--|--|--|
| (Requestor's Name)                      |             |  |  |  |
| (Address)                               | -           |  |  |  |
| (Address)                               | _           |  |  |  |
| (City/State/Zip/Phone #)                | -           |  |  |  |
| PICK-UP WAIT MAIL                       |             |  |  |  |
| (Business Entity Name)                  |             |  |  |  |
| (Document Number)                       |             |  |  |  |
| Certified Copies Certificates of Status | <del></del> |  |  |  |
| Special Instructions to Filing Officer: |             |  |  |  |
|   |             |  |  |  |
|   |             |  |  |  |
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|   |             |  |  |  |

Office Use Only



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AUG 22 2014 S. YOUNG

## COVER LETTER \* ,

| TO: Registration Division of                              | Section<br>Corporations                      |   | ,   |                |
|---|--|---|---|----------------|
| SUBJECT: CIH C  | Galleria Parent LLC                          | reign Limited Liability   | Company)  | <del></del>    |
|   | (Manie of For                                | eigh Dimited Diability  | company)  |                |
| Dear Sir or Madam:  |  |   |   |                |
| The enclosed withdra                                      | awal and fee(s) are submitte                 | d for filing.   |   |                |
| Please return all corr                                    | espondence concerning this                   | matter to the following   | ;   |                |
| Ruth Shumway  |  |   |   | 经济 字           |
|   | (Name of Person)                             |   | -   | 16 21<br>16 21 |
| Ashford Hospita   | ality  |   | _   | ELFO           |
|   | (Firm/Company)                               |   |   |                |
| 14185 Dallas P  | arkway, Suite 1100                           |   | _   |                |
|   | (Address)                                    |   |   |                |
| Dallas, Texas   | 75254  |   |   |                |
|   | (City/State and Zip Cod                      | le)   | -   |                |
| For further informati                                     | on concerning this matter, p                 | lease call:   |   |                |
| Ruth Shumway  |  | 972<br>at (   | 778-9203  |                |
| (Na   | ame of Person)                               |   | t Daytime Telephone Number)                                     | <del></del>    |
| Registratior<br>Division of<br>Clifton Buil<br>2661 Execu | Corporations                                 | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 |   |                |
| Enclosed is a check                                       | for the following amount:                    |   |   |                |
| 2 \$25 Filing Fee   | □ \$30 Filing Fee &<br>Certificate of Status | □ \$55 Filing Fee &<br>Certified Copy   | □ \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |                |

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

| CIH Galleria Parent LLC  |                           |
|--|---------------------------|
| (Name of limited liability company)  |                           |
| Delaware   |                           |
| (Jurisdiction of its organization)   |                           |
| 06/24/2002   |                           |
| (Date registered with Florida Department of State)   | <del></del>               |
| M02000001657   |                           |
| (Florida Document Number)  | <del></del>               |
| This limited liability company is withdrawing its certificate of authority in this state  (Signature of authorized representative) |                           |
| David A. Brooks, Vice President  | Too                       |
| (Typed or printed name of signee)  | FILED  MEGALINISS CALABIN |

Filing Fee: \$25.00