

#M020000001990

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
2014 DEC 31 AM 10:51  
NOT RETURNED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

FILED  
2014 DEC 31 AM 9:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER  
JAN - 1 2015

ACCOUNT NO. : I20000000195

REFERENCE : 444588 7477555

AUTHORIZATION :

COST LIMIT : \$25.00

*Lyndee*

ORDER DATE : December 30, 2014

ORDER TIME : 9:46 AM

ORDER NO. : 444588-010

CUSTOMER NO: 7477555

FOREIGN FILINGS

NAME: WESTPOINTE OPERATING COMPANY,  
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: Courtney Williams - EXT# 62935

EXAMINER: \_\_\_\_\_

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** WESTPOINTE OPERATING COMPANY, LLC  
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

\_\_\_\_\_  
(Name of Person)

WESTPOINTE OPERATING COMPANY, LLC  
(Firm/Company)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

\_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|--|---|--|--|

FILED  
2014 DEC 31 AM 9:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

WESTPOINTE OPERATING COMPANY, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

July 31, 2002

(Date registered with Florida Department of State)

M02000001990

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

(Signature of authorized representative)

Please see attached signature page

(Typed or printed name of signee)

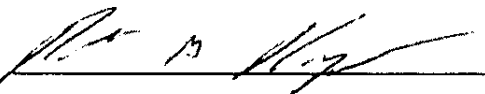
**Filing Fee: \$25.00**

Executed on this 30 day of December, 2014

FILED  
2014 DEC 31 AM 9:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

WESTPOINTE OPERATING COMPANY, LLC, a Delaware limited liability company

By: PRINCIPAL REAL ESTATE INVESTORS, LLC, a Delaware limited liability company, its authorized signatory

By 

Robert G. Roepsch  
Equity Real Estate Administrator

By 

Russell A. Beecher  
Director - Acquisitions/Dispositions