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FILED SECRETARY OF STATE TALLAHASSTELTLO D

16 JUN - 7 PM is 2

A PROPERTY OF THE PROPERTY OF

JUN 0 9 2016 S. YOUNG CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 171325 7579688

AUTHORIZATION :

COST LIMIT : \$/25.00

ORDER DATE: June 7, 2016

ORDER TIME : 3:46 PM

ORDER NO. : 171325-020

CUSTOMER NO: 7579688

FOREIGN FILINGS

NAME: MEDALIST ADVISORS, L.L.C.

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:

TO:	Registratio Division of	n Section f Corporations		
SUBJI	Med	alist Advisors, LLC		
		(Name of Fo	reign Limited Liability (Company)
Dear S	ir or Madam:			
The en	closed withda	rawal and fee(s) are submitte	ed for filing.	
Please	return all cor	respondence concerning this	matter to the following:	
Cour	tney Merk)		
	.,	(Name of Person)		
Ares	Managen	nent		
•		(Firm/Company)		
245	Park Aven	ue, 43rd Floor		
		(Address)		
New	York, NY	10167		
		(City/State and Zip Coo	le)	
For fur	ther informat	ion concerning this matter, p	olease call:	
Cour	tney Merlo)	212	515-3340
	(N	ame of Person)		Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Registr Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, Florida 32314	
Enclos	ed is a check	for the following amount:		
□ \$25	Filing Fee	□ \$30 Filing Fee & Certificate of Status	☐ \$55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Medalist Advis	ors, LLC	
	(Name of limited liability company)	
Delaware		
	(Jurisdiction of its organization)	
9/9/02		6
	(Date registered with Florida Department of State)	
M02000002629	9	ထဲ ကို
	(Florida Document Number)	
This limited liab	ility company is withdrawing its certificate of authority in this state.	<u> </u>
	Stemp Joanny	ئا. ما
_	(Signature of authorized representative)	
S	Stuart F. Koenig	
	(Typed or printed name of signee)	

Filing Fee: \$25.00