

M02000003518

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

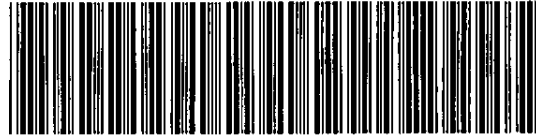
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only




100286016481

RECEIVED
DEPARTMENT OF STATE
16 MAY 20 AM 7:18
16 MAY 20 AM 10:56
FALL AHBASSISTANT LONDON

MAY 23 2016

J SHIVERS

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

ACCOUNT NO. : I20000000195
REFERENCE : 148959 7113721
AUTHORIZATION : 
COST LIMIT : \$ 25.00

ORDER DATE : May 20, 2016
ORDER TIME : 8:54 AM
ORDER NO. : 148959-040
CUSTOMER NO: 7113721

FOREIGN FILINGS

NAME: CDC CROSSINGS GP, L.L.C.

☐ CORPORATE
☐ LIMITED PARTNERSHIP
☒ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Courtney Williams - EXT# 62935

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CDC Crossings GP, L.L.C.
(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:

HASANA R KELLY

(Name of Person)

SunTrust Community Capital, LLC

(Firm/Company)

303 Peachtree Street NE - GA-ATL-0643

(Address)

Atlanta, Georgia 30308

(City/State and Zip Code)

For further information concerning this matter, please call:

HASANA R KELLY at 404 813-6735
(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:

- ☒ \$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

CDC CROSSINGS GP, LLC

(Name of limited liability company)

GEORGIA

(Jurisdiction of its organization)

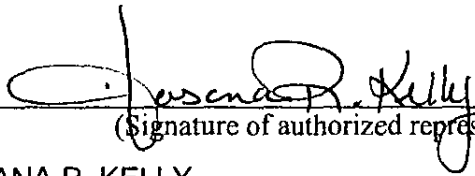
10/20/2002

(Date registered with Florida Department of State)

M02000003518

(Florida Document Number)

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



(Signature of authorized representative)

HASANA R. KELLY

(Typed or printed name of signee)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 MAY 20 AM 7:19

FILED

Filing Fee: \$25.00