

M03000002165

(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



300293568443

12/27/16--01037--024 \*\*52.50

FILED  
17 JAN 30 AM 7:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** DJONT/JPM BOCA RATON LEASING, L.L.C.  
(Name of Corporation)

**DOCUMENT NUMBER:** M03000002165

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this  
matter to the following:

Elizabeth Tillman-Bounds

(Name of Person)

FelCor Lodging Trust Incorporated

(Firm/Company)

125 E. John Carpenter Freeway, Suite 1600

(Address)

Irving, Texas 75062

(City/State and Zip code)

For further information concerning this matter, please call:

Elizabeth Bounds

(Name of Person)

at ( 972 ) 444-4910

(Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☒ \$52.50 Filing Fee,  
Certificate of Status Certified Copy Certificate of Status & Certified  
(Additional copy is Enclosed) Copy (Additional copy is enclosed)

**MAILING ADDRESS:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL.32314

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL. 32301

**NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY**

DJONT/JPM Boca Raton, L.L.C.

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

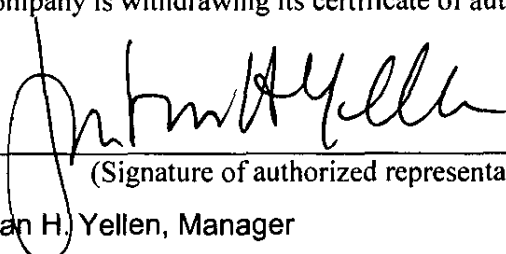
07/02/2003

(Date registered with Florida Department of State)

M03000002165

(Florida Document Number)

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



(Signature of authorized representative)

Jonathan H. Yellen, Manager

(Typed or printed name of signee)

FILED  
17 JAN 30 AM 7:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Filing Fee: \$25.00**