

MU3UOUU4272

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

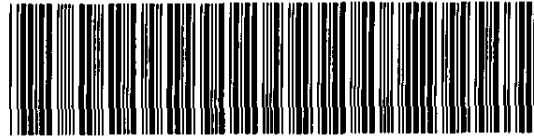
Special Instructions to Filing Officer:

Office Use Only

B. KOHR

JUN 17 2011

EXAMINER



300208931833

RECEIVED

11 JUN 17 PM 1:42

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

11 JUN 17 PM 3:00



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 816302 167868A

AUTHORIZATION :

COST LIMIT : \$ 25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 JUN 17 PM 3:00

[Handwritten Signature]

ORDER DATE : June 17, 2011

ORDER TIME : 10:34 AM

ORDER NO. : 816302-005

CUSTOMER NO: 167868A

FOREIGN FILINGS

NAME: HS-ORLANDO FL, LLC

☐ 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: Jeanine Reynolds - EXT# 2933

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HS-ORLANDO FL LLC
(Name of Foreign Limited Liability Company)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 JUN 17 PM 3:00

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)

CSC

(Firm/Company)

2711 Centerville Rd

(Address)

Wilmington, DE 19808

(City/State and Zip Code)

For further information concerning this matter, please call:

Hollye Sammons

(Name of Person)

at (704) 715-2401

(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

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR
WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN
FLORIDA

FILED STATE
SECRETARY OF CORPORATIONS
JUN 17 PM 3:00

HS-ORLANDO FL, LLC
(Name of limited liability company)

Delaware
(Jurisdiction of its organization)

MD3000004272
(Florida Document Number)

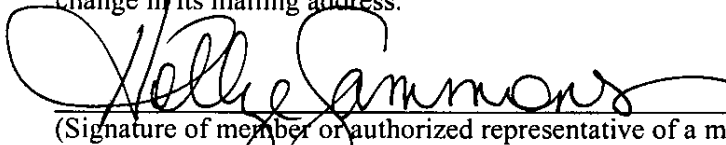
This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.

This limited liability company revokes the authority of its registered agent to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business in Florida.

c/o CSC 2711 Centerville Rd
(Mailing address)

Wilmington, DE 19808
(City/State/Zip)

The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.


(Signature of member or authorized representative of a member)

Hollye Sammons
(Typed or printed name of signee)

Filing Fee: \$25.00