*M05000001064

| (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: |
| |
| |
| |





700271344707

NOT IN CHEEL TO ACKNOWLEDGE TO ACKNOWLEDGE TO ACKNOWLEDGE DEPARTMENT OF STANDOWNSTANDON DR 2: 55

IS APR 23 AM DO: L

K.SALY EXAMINER

| REFERENCE : 600778 7329463 AUTHORIZATION : | | | | | | |
|--|--|--|--|--|--|--|
| COST LIMIT : \$ 25.00 | | | | | | |
| COST DIMIT . \$ 25.00 | | | | | | |
| ORDER DATE : April 23, 2015 | | | | | | |
| ORDER TIME : 12:26 PM | | | | | | |
| ORDER NO. : 600778-070 | | | | | | |
| CUSTOMER NO: 7329463 | | | | | | |
| | | | | | | |
| FOREIGN FILINGS | | | | | | |
| NAME: LB SOUTH BEACH MANAGER 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: Lydia Cohen - EXT# 62974 | | | | | | |
| EXAMINER: | | | | | | |

ACCOUNT NO. : 12000000195

COVER LETTER

| | | n Section Corporations | | | | | |
|--|-------------|--|---|-----------|---|--|--|
| SUBJECT: | LBS | LB South Beach Manager LLC | | | | | |
| | | (Name of Fo | reign Limited Lie | ability (| Company) | | |
| Dear Sir or | Madam: | | | | | | |
| The enclose | d withdr | awal and fee(s) are submitte | ed for filing. | | | | |
| Please retur | n all com | espondence concerning this | s matter to the fol | lowing | : | | |
| Linda A. | Klang | | | | | | |
| | | (Name of Person) | • | | | | |
| Lehman | Brothe | rs Holdings Inc. | | | | | |
| | | (Firm/Company) | | | | | |
| 101 Hud | son St | reet, Tax Dept 38th | floor | | | | |
| | | (Address) | | | | | |
| Jersey C | ity, NJ | 07302 | | | | | |
| | | (City/State and Zip Cod | le) | | | | |
| For further i | nformatio | on concerning this matter, p | lease call; | | | | |
| Linda A. | Klang | | 201 | , | 526-1484 | | |
| | (Na | rme of Person) | | 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: | | | | | |
| S \$25 Filing | g Fee | ☐ \$30 Filing Fee & Certificate of Status | S55 Filing For Certified Cor | | □ \$60 Filing Fee, Certificate of Status & Certified Copy | | |



NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

| LB South Beach Manager LLC |
|---|
| (Name of limited liability company) |
| Delaware |
| (Jurisdiction of its organization) |
| 03/01/2005 |
| (Date registered with Florida Department of State) |
| M0500001064 |
| (Florida Document Number) |
| This limited liability company is withdrawing its certificate of authority in this state. |
| (Signature of authorized representative) |
| Linda A. Klang |
| (Typed or printed name of signec) |

Filing Fee: \$25.00