

1705000003041

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 205-8842
Fax Number : (850) 878-5368

LLC DISSOLUTION OR WITHDRAWAL
GILA RIVER LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

15 MAY - 4 AM 10:00

15 MAY - 4 AM 10:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 MAY - 4 AM 8:50

FILED

Electronic Filing Menu

Corporate Filing Menu

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MAY - 5 2015

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gila River LLC
(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:

Jerry Coffey
(Name of Person)

Entegra TC LLC
(Firm/Company)

100 S. Ashley Dr Suite 1400
(Address)

Tampa FL 33602
(City/State and Zip Code)

For further information concerning this matter, please call:

Jerry Coffey at (813) 301-4998
(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

Gila River LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

06/06/2005

(Date registered with Florida Department of State)

M05000003041

(Florida Document Number)

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

[Signature]

(Signature of authorized representative)

Jerry Coffey

(Typed or printed name of signee)

Filing Fee: \$25.00

FILED
15 MAY -4 AM 8:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA