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(Requestor's	Name)
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(Business En	tity Name)
(Document N	umber)
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE : 282933 4332382 AUTHORIZATION : COST LIMIT : \$ 55.00 ORDER DATE : December 23, 2022 9:13 AM ORDER TIME : ORDER NO. : 282933-340 CUSTOMER NO: 4332382 FOREIGN FILINGS NAME: TRUMP LAS OLAS LLC CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY XXXX WITHDRAWAL/CANCELLATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX CERTIFIED COPY

EXAMINER:

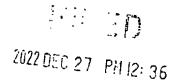
_____ PLAIN STAMPED COPY

__ CERTIFICATE OF STATUS

CONTACT PERSON: Alexxis Weiland - EXT#

COVER LETTER

Division of Co			
Trump La SUBJECT:	as Olas LLC		
SOBSECT:	(Name of For	eign Limited Liability	Company)
Dear Sir or Madam:			
The enclosed withdraw	al and fee(s) are submitte	d for filing.	
Please return all corresp	ondence concerning this	matter to the followin	g:
Lizebeth Kyprislidis			
	(Name of Person)	•	_
c/o The Trump Organ	nization		
	(Firm/Company)		_
725 5th Avenue, 26th	i FL		
	(Address)		_
New York, NY 10022	 		
	(City/State and Zip Cod	e)	_
For further information	concerning this matter, p	lease call:	
Lizebeth Kyprislidis		212 at (715-7285)
(Name	of Person)		& Daytime Telephone Number)
Mailing Addre Registration Division of O P.O. Box 63: Tallahassee,	Section Corporations 27		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
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

	Trump Las Olas LLC
	(Name of limited liability company)
	Delaware
	(Jurisdiction of its organization)
	June 13, 2005
	(Date registered with Florida Department of State)
	M05000003177
	(Florida Document Number)
Effective Date.	bility company is withdrawing its certificate of authority in this state. if other than the date of filing: (optional) date is listed, the date must be specific and cannot be prior to date of filing or
more than 90 da Note: If the dat	e inserted in this block does not meet the applicable statutory filing requirements, but be listed as the document's effective date on the Department of State's records.
more than 90 da Note: If the dat this date will no	ays after filing.) e inserted in this block does not meet the applicable statutory filing requirements, of be listed as the document's effective date on the Department of State's records. (Signature of authorized representative)
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more than 90 da Note: If the dat this date will no	ays after filing.) e inserted in this block does not meet the applicable statutory filing requirements, of be listed as the document's effective date on the Department of State's records. (Signature of authorized representative)

Filing Fee: \$25.00