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(Requestor	's Name)
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(City/State/	Zip/Phone #)
PICK-UP	WAIT MAIL
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(Document	Number)
Certified Copies C	entificates of Status
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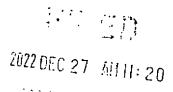
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500						
-	ACCOUNT NO. : 120000000195 REFERENCE : 282933 4332382 AUTHORIZATION : Franklike para COST LIMIT : \$ 55.00					
ORDER DATE :	December 23, 2022					
ORDER TIME :	9:12 AM					
ORDER NO. :	282933-330					
CUSTOMER NO:	4332382					
FOREIGN FILINGS NAME: TRUMP FLORIDA MANAGEMENT LLC						
CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY						
XXXX WITHDRAWAL/CANCELLATION						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
	FIED COPY STAMPED COPY FICATE OF STATUS					
CONTACT PERSON: Alexxis Weiland - EXT#						

EXAMINER:

COVER LETTER

TO: Registration Section Division of Corporations Trump Florida Management LLC SUBJECT: (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: Lizebeth Kyprislidis (Name of Person) c/o The Trump Organization (Firm/Company) 725 5th Avenue, 26th FL (Address) New York, NY 10022 (City/State and Zip Code) For further information concerning this matter, please call: 715-7285 Lizebeth Kyprislidis (Name of Person) (Area Code & Daytime Telephone Number) Mailing Address: Street Address: Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Enclosed is a check for the following amount: □\$25 Filing Fee □ \$30 Filing Fee & **■\$55** Filing Fee & □ \$60 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certified Copy



NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

		Trump Florida Managem	ent LLC			
		(Name of limited liability	company)			
		Delaware				
	(Jurisdiction of its organization)					
		June 13, 2005				
		(Date registered with Florida Department of State)				
		M05000003178				
·		(Florida Document N	umber)			
Effective Date, (If an effective more than 90 da Note: If the dat	if other th date is list ays after fi e inserted	pany is withdrawing its certifican the date of filing: ed, the date must be specific a ling.) in this block does not meet the as the document's effective of	and cannot be prior to date of applicable statutory filing	(optional) of filing or grequirements.		
-		(Signature of authorized	raprocontativo	-		
	Alan Garter	, ,	representative)			
·						
		(Typed or printed nar	ne of signee)			

Filing Fee: \$25.00