## M05000004790

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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DEPERTMENT OF STATE

DEC 2 9 2014 J. HARRIS 14 DEC 24 PH 3: 52

ACCOUNT NO. : 12000000195

REFERENCE: 434353 7578756

AUTHORIZATION

COST LIMIT

ORDER DATE: December 23, 2014

ORDER TIME : 9:42 AM

ORDER NO. : 434353-110

CUSTOMER NO: 7578756

## FOREIGN FILINGS

NAME: H. RIVER TWO TENANT 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: Courtney Williams - EXT# 62935

EXAMINER:

## **COVER LETTER**

	sistration Section ision of Corporations	
SUBJECT:	H. River Two Tenant LLC	
	(Name of Foreign Limite	d Liability Company)
Dear Sir or M	Madam:	
The enclosed	withdrawal and fee(s) are submitted for filing.	
Please return	all correspondence concerning this matter to th	e following:
	Aerhe Rec	
	(Name of Person)	<del></del>
	Interventure Aduscus	
	(Firm/Company)	
810 7th Av	ve., Suite 3601	
	(Address)	<del></del>
New York,	, NY 10019 <sup>,</sup>	
	(City/State and Zip Code)	<del></del>
For further inf	formation concerning this matter, please call:	
Aerhe Pae	ek 6.	46 376-4674
		rea Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother Circle Tallahassee, Florida 32301  Enclosed is a check for the following amount:  MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 Tallahassee, Florida 32301		
S25 Filing F	_	

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

H. River Two Tenant LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
8/29/2005
(Date registered with Florida Department of State)
M05000004790
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
(Signature of authorized representative)
Jennifer Toh
(Typed or printed name of signee)

Filing Fee: \$25.00

14 DEC 24 PH 3: 53

SECRETARY OF STATE DIVISION OF CORPORATIONS