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| estor's Name) | |
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| Certificate | s of Status |
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K. SALY JAN - 3 2018

DRA ADVISORS LLC 220 East 42nd Street, 27th Floor New York, New York 10017 (212) 697-4740

December 20, 2017

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: DRA CRT Orlando Central Center LLC

To Whom It May Concern:

Attached please find the Notice of Withdrawal for the above-mentioned entity. DRA CRT Orlando Central Center LLC is no longer transacting business/conducting affairs in the state of Florida. Please accept this application as evidence of the entity's surrender of authority to do business in the state. Thank you in advance for your cooperation on this matter. If you have any questions, please do not hesitate to contact me at (212) 697-4740

Sincerely,

Indira Negron Tax Department

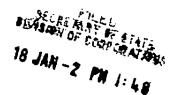
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Enclosures

COVER LETTER

TO:

| TO: | | istration ision of (| Section Corporations | | | | |
|---------------|--|--|---|-----------------------------------|---|---|--|
| SUBJE | `CT· | : DRA CRT ORLANDO CENTRAL CENTER LLC (Name of Foreign Limited Liability Company) | | | | | |
| 50051. | | | | | | | |
| Dear Si | ir or N | dadam: | | | | | |
| The end | closec | l withdra | wal and fee(s) are submitted | d for filing. | | | |
| Please | return | all corre | espondence concerning this | matter to the follo | owing: | | |
| Indira | a Ne | gron | | | | | |
| | | | (Name of Person) | | | | |
| C/O I | DRA | Advis | ors LLC | | | | |
| | | | (Firm/Company) | | | | |
| 220 E | ∃ast | 42nd | Street, 27th Floor | | | | |
| | | | (Address) | | | | |
| New | Yorl | k, NY 1 | 0017 | | | | |
| | | | (City/State and Zip Cod | le) | | | |
| For fur | ther i | nformatio | on concerning this matter, p | lease call: | | | |
| Indira | a Ne | gron | | 212 at (|) | 697-4740 | |
| | <u>-</u> . | (No | ime of Person) | | ode & 1 | 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 | | ration Section on of Corporations ox 6327 | | |
| Enclos | ed is | a check | for the following amount: | | | | |
| ☑ \$25 | Filing | g Fee | ☐ \$30 Filing Fee & Certificate of Status | □ \$55 Filing Fe Certified Cop | | ☐ \$60 Filing Fee, Certificate of Status & Certified Copy | |



NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

| DRA CRI ORLANDO CENTRAL CENTER LLC |
|---|
| (Name of limited liability company) |
| Delaware |
| (Jurisdiction of its organization) |
| 09/16/2005 |
| (Date registered with Florida Department of State) |
| M05000005131 |
| (Florida Document Number) |
| This limited liability company is withdrawing its certificate of authority in this state. |
| (Signature of authorized representative) 5950n Borreo |
| (Typed or printed name of signee) |

Filing Fee: \$25.00