M05000005728

(Re	equestor's Name)		
(Ad	ldress)		
(Ad	ldress)		
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	ısiness Entity Nar	me)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to	Filing Officer:		

Office Use Only



500273475535

06/08/15--01031--006 **25.00

FILED
2015 JUN -8 P 1: 01
SECRETARY OF STATE

CUIDO TITO BRUCE

COVER LETTER

₩.,

TO Registration Section Division of Corporations

)

SUBJECT: BREA	/Florida Wellesley LLC	;			
		eign Limited Liability	Company)		
Dear Sir or Madam:					
The enclosed withdra	awal and fee(s) are submitte	d for filing.			
Please return all corr	espondence concerning this	matter to the following	ng:		
ANNE MARAJ					
	(Name of Person)		_		
WHM LLC					
	(Firm/Company)	· · · · · · · · · · · · · · · · · · ·	_		
501 EAST CA	MINO REAL			7	
	(Address)		_	SEC	2015
BOCA RATON	I, FL 33432			RETA AHAS	8- NOC 5102
	(City/State and Zip Cod	e)	_	RY SEE	8
For further informati	ion concerning this matter, p	olease call:		OF STATI	D :: 0
ANNE MARAJ		_{at (} 561	, 447-5318	Ď,,,	=
(N	ame of Person)		& Daytime Telephone N	umber)	
Registration Division of Clifton Bui 2661 Execu	Corporations	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	S55 Filing Fee & Certified Copy	■ \$60 Filing Fee, Certificate of St Certified Copy		

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

BRE/Florida Wellesley LLC
(Name of limited liability company)
DELAWARE
(Jurisdiction of its organization)
M0500005728
(Florida Document Number)
This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.
This limited liability company revokes the authority of its registered agent to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business in Florida.
501 EAST CAMINO REAL (Mailing address) BOCA RATON, FL 33432
BOCA RATON, FL 33432
(City/State/Zip)
The limited liability company agrees to notify the Department of State in the Tuture of any change in its mailing address.
(Signature of member or authorized representative of a member)
ANTHONY BEOVICH
(Typed or printed name of signee)

Filing Fee: \$25.00