MOSOOOOSFIT

(R	equestor's Name)	<u> </u>
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(A	ddress)	
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(C	ity/State/Zip/Phone #)	1
PICK-UP	☐ WAIT	MAIL MAIL
	usiness Entity Name)	·····
(6	usiness Entity Name)	
(D	ocument Number)	<u> </u>
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SALUKE PARY OF STATE TALLAHASSEF, FI OPINA

SEP 23 2015 J SHIVERS CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 789788 8059963

AUTHORIZATION :

COST LIMIT : \$25.00

ORDER DATE: September 18, 2015

ORDER TIME : 10:46 AM

ORDER NO. : 789788-140

CUSTOMER NO: 8059963

FOREIGN FILINGS

NAME: ATRIUM FINANCE GP I, 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

		n Section Corporations			
SUBJECT	. Atriu	m Finance GP I, LLC			
3043267	· _	(Name of Fo	reign Limited Liability	Company)	•
Dear Sir or	Madam:				
The enclos	ed withdr	awal and fee(s) are submitte	ed for filing.		
Please retu	rn all cor	respondence concerning this	matter to the following	; :	
Brian Ca	ameron	l			
		(Name of Person)		-	
Atrium F	Holding	Company			
		(Firm/Company)	<u> </u>		
1114 Au	enue c	of the Americas, 39th	Floor,	_	
	· · ·	(Adáress)			
New Yo	rk, Nev	V York 10036			
——————————————————————————————————————		(City/State and Zip Coo	le)	-	
For further	informat	ion concerning this matter, p	lease call;		
Brian Ca	ameron		212 at (730-7211	
· · · · · · · · · · · · · · · · · · ·	(N	ame of Person)		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			
□ \$25 Fili		for the following amount: \$\Bigsirem\$ \$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

Atrium Finance GP I, LLC		
(Name of limited liability company)	, , , , , , , , , , , , , , , , , , , 	
Delaware		
(Jurisdiction of its organization)		
10/17/2005		
(Date registered with Florida Department of State)		
M0500005827		
(Florida Document Number)		
This limited liability company is withdrawing its certificate of authority in this state.		
(Signature of authorized representative)	15 SEP 2.	, j.
Brian Camerol	調査へ	•
(Typed or printed name of signee)	## 10: 5	

Filing Fee: \$25.00