3/28/2017



Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (614)280-3338

Fax Number

: (954)208-0845

LLC DISSOLUTION OR WITHDRAWAL

FV SPE, LLC.

Certificate of Status	0
Certified Copy	0
Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

MAR 29 2017

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COVER LETTER

TO:	Registration of	n Section Corporations		
SUBJE	CT: FV SP	E, LLC	/	
		(Name of Fo	reign Limited Liability (Company)
Dear Si	ir or Madam:			
The end	closed withdr	awal and fee(s) are submitte	d for filing.	
Please	return all com	respondence concerning this	matter to the following:	:
Jan R.	Ezell, Corpor	rate Paralegal		
	التقاوية (الرابع والقولو و الور والتقاوية (المرابع الواقع المساوة والمساوة والمساوة والمساوة والمساوة والمسا	(Name of Person)	-	
			<i>₹</i> 7	
Alston	& Bird LLP			
		(Firm/Company)		
1201 V	Vest Peachtre	e Street		
		(Address)		•
Atlanti	a, GA 20309-	3424		
		(City/State and Zip Cod	le)	•
For fur	ther informati	ion concerning this matter, p	elease call:	
Jan R.	Ezell		404	881-7442
**************************************	(N	ame of Person)	at (at Code &	Daytime Telephone Number)
	Registration Division of Clifton Bui 2661 Execu	Corporations	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Encios	ed is a check	for the following amount:		
□ \$ 25	Filing Fee	□ \$30 Filing Fee & Certificate of Status	Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certifled Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

rv spe, elc
(Name of limited liability company)
``
Delaware
(Jurisdiction of its organization)
March 21, 2006
(Date registered with Florida Department of State)
M06000001618
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
(Signature of authorized representative)
(Signature of authorized representative)
Noah R. Levy, Vice President
(Typed or printed name of signee)

Filing Fee: \$25.00

MIN MA 78 A 4 43
RECRETARY OF STATE