

MDL0000003214

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

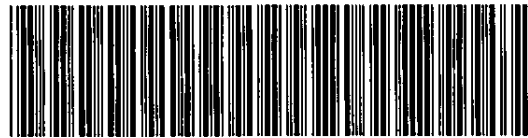
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700268121757

01/23/15--01016--015 **25.00

FILED
2015 JAN 23 PM 4:21
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FEB 03 2015
J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Patton Hospitality Management, LLC
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Miriam Day, Corporate Paralegal

(Name of Person)

Patton Hospitality Management, Inc.

(Firm/Company)

One Vance Gap Road

(Address)

Asheville, NC 28805

(City/State and Zip Code)

For further information concerning this matter, please call:

Miriam Day

(Name of Person)

at (828) 348-2500 x4312
(Area Code & 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

Enclosed is a check for the following amount:

- ☒ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

FILED
2015 JAN 23 PM 4:21
SECRETARY OF STATE
TALLAHASSEE FLORIDA

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Patton Hospitality Management, LLC

(Name of limited liability company)

Nevada

(Jurisdiction of its organization)

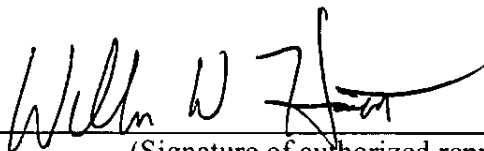
06/08/2006

(Date registered with Florida Department of State)

M06000003214

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.



(Signature of authorized representative)

William Horton, Manager

(Typed or printed name of signee)

FILED
2015 JAN 23 PM 4:21
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Filing Fee: \$25.00