10/13/2017

Division of Corporations

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Tc:

Division of Corporations

Fax Number : (858)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (\$12)418-6949 Fax Number : (954)208-0845

> LLC DISSOLUTION OR WITHDRAWAL PR II THORNTON PARK LLC

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Help

COVER LETTER

TO: Registration Division of	Section Corporations		
SUBJECT: PR II	THORNTON PAI	RK LLC reign Limited Liability (Company
	(Manie Of FO	reign connect clapmity (Lompany)
Dear Sir or Madam:			
The enclosed withdra	wal and fee(s) are submitte	d for filing.	
Picase return all corre	espondence concerning this	matter to the following	:
	(Celly Arrigo	·····	
	(Nume of Person)		
D.C.	The strain Anna Strain Action	13	
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7 (Giralda Farms		
Through graph assessment to Through Agraph A	(Address)		
1.4	adiam NH 07040		
·	adison, NJ 07940 (City/State and Zip Cod	le)	
For further information	in concerning this matter, p	lease call:	
Donah Sin	nmons	at (973) 734-1300 Daytime Telephone Number)
(Nu	me of Person)	(Area Code &	Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Tallahussee, Florida 32344		ration Section on of Corporations ox 6327	
	Florida 32301	1 Bugg	455cc, Florida 323 f4
Enclosed is a check i	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

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

PR II THORNTON PARK LLC	
(Name of fimited liability company)	
DELAWARE	
(Jurisdiction of its organization)	
June 23, 2006	
(Date registered with Florida Department of State)	
M06000003549	
(Florida Document Number)	
This limited liability company is withdrawing its certificate of authority in this state.	
Effective Date, if other than the date of filing:	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.	
OCT 13	1 1
1) a st la manufacture de la constantina della	L'U
(Signature of authorized representative)	O
ت ت Darin Bright ت) B.
(Typed or printed name of signee)	

Filing Fee: \$25.00