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| (Requestor's Name) | | | | | |
|---|-------------------|-------------|--|--|--|
| (Address) | | | | | |
| (Ad | dress) | | | | |
| (Cit | y/State/Zip/Phon | e #) | | | |
| PICK-UP | WAIT | MAIL | | | |
| (Bu | siness Entity Nar | ne) | | | |
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COVER LETTER

| TO: Registratio Division of | n Section Corporations | | | | | |
|--|--|---|---|------|------------------|--------|
| Palm subject: | netto Brookview Opera | ating, LLC | | | | |
| SUBJECT: | (Name of Fo | eign Limited Liability (| Company) | | | |
| Dear Sir or Madam: | | | | | | |
| The enclosed withde | rawal and fee(s) are submitte | d for filing. | | | | |
| Please return all cor | respondence concerning this | matter to the following: | | | | |
| Michael I. Berr | nstein, Esq. | | | | | |
| | (Name of Person) | | | | | |
| The Bernstein | Law Firm | | | | | |
| | (Firm/Company) | ,. , | | | | |
| 3050 Biscayne | Boulevard, Suite 403 | 3 | | TALL | - 2016 OCT - | |
| | (Address) | | | | OC.1 | E HOTO |
| Miami, FL 331 | 37 | | | ASSE | <u></u> | j |
| | (City/State and Zip Cod | le) | | T C | \triangleright | |
| For further informat | lion concerning this matter, p | lease call: | | 1130 | <u>ب</u> ب | · · |
| Michael I. Berr | nstein, Esq. | 305 | 672-9544 | Ď. | တ | |
| 4) | lame of Person) | at (at (Area Code & | Daytime Telephone Number) | | | |
| Registratio Division o Clifton Bu 2661 Exec | f Corporations | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 | | | | |
| Enclosed is a check | c for the following amount: | | | | | |
| 2 \$25 Filing Fee | □ \$30 Filing Fee & Certificate of Status | \$55 Filing Fee & Certified Copy | \$60 Filing Fee, Certificate of Status & | | | |

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

· . Ÿ

| Palmetto B | rookview Operating, LLC | |
|--------------|--|------------|
| | (Name of limited liability company) | |
| Delaware | | |
| | (Jurisdiction of its organization) | |
| 09/28/2006 | 3 | |
| | (Date registered with Florida Department of State) | |
| M0600000 | 5414 | |
| | (Florida Document Number) | - |
| This limited | liability company is withdrawing its certificate Fauthority in t | his state. |
| | | ZUIS OCT |
| | (Signature of authorized representative) | |
| | Avi Klein | |
| | (Typed or printed name of signee) | |

Filing Fee: \$25.00