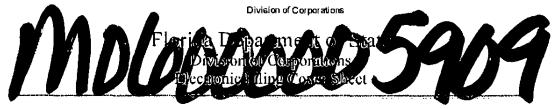
11/10/2016



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023 Phone : (614)280-3338

Phone : (614)280-3338 Fax Number : (954)208-0845 2016 NOV 10 A
SECRETARY OF S
ALLAHASSEE, FL

## MENOVIO PHIST

## LLC DISSOLUTION OR WITHDRAWAL HPI OPTION 2 LLC

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Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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Corporate Filing Menu

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## **COVER LETTER**

TO: Registratio Division of	n Section Corporations				
SUBJECT: HPLO	ption 2 LLC (Name of For	reign Limited Liability	Company)		
<b>-</b>					
Dear Sir or Madam:					
The enclosed withdr	awal and fee(s) are submitte	d for filing.			
Please return all cor	respondence concerning this	matter to the following	<b>g</b> ;		
Leslie E. Green					
	(Name of Person)		<u>-</u>		
HPI Option 2 LLC			_	==	
	(Firm/Company)			2016 I SECH ALLA	<b>ts</b> .
1745 Shea Center D	Orive, Suite 200		_	2016 NOV 10 A 11: 09 SECRETARY OF STATE ALLAHASSEE, FLORIDA	r
	(Address)			SE	1
Highlands Ranch, C	CO 80129		_	OF S	[] []
	(City/State and Zip Cod	le)		DRIE C	
For further informat	ion concerning this matter, p	olease call:		) <b>9</b>	
Leslie E. Green		720	283-6120		
(N	ame of Person)	at ( (Area Code &	Daytime Telephone Numbe	r)	
Registratio Division of Clifton Bui 2661 Exect	Corporations	Regis Divls P.O. l	LING ADDRESS: tration Section ion of Corporations Box 6327 hassee, Florida 32314		
Enclosed is a check	for the following amount:				
□ \$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status Certified Copy	&	

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

HPI Option 2 LLC	
(Name of limited liability company)	
Delaware	
(Jurisdiction of its organization)	
October 25, 2006	
(Date registered with Florida Department of State)	
M06000005909-	
(Florida Document Number)	
This limited liability company is withdrawing its certificate of authority in this	s state.
Seslie Sur_ (Signature of authorized representative)	2016 NOV 10 SECRETARY TALLAHASSE
Leslie E. Green, Authorized Person	W II
(Typed or printed name of signee)	O A II: O

Filing Fee: \$25.00