

#106000006525

Division of Corporations

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Florida Department of State
Division of Corporations
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Division of Corporations
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LLC DISSOLUTION OR WITHDRAWAL
PYRAMID MIAMI MANAGEMENT LLC

Certificate of Status	0
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K. SALY
EXAMINER
DEC 27 2012

1

SUBJECT: Pyramid Miami Management LLC
(Name of Foreign Limited Liability Company)

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

Cynthia Warren

(Name of Person)

Pyramid Hotel Group
(Firm/Company)

One Post Office Square, Suite 3100
(Address)

Boston, MA - 02109

For further information concerning this matter, please call:

_____ at (_____) _____
(Name of Person) (Area Code & Daytime Telephone Number)

**Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301**

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 ☐ \$35 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR
WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN
FLORIDA**

Pyramid Miami Management LLC

(Name of limited liability company)

Massachusetts

(Jurisdiction of its organization)

M06000006525

(Florida Document Number)

This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.

This limited liability company revokes the authority of its registered agent to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business in Florida.

One Post Office Square, Suite 3100

(Mailing address)

Boston, MA - 02109

(City/State/Zip)

The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.



(Signature of member or authorized representative of a member)

Christopher Devine, authorized person

(Typed or printed name of signee)

Filing Fee: \$25.00

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