2/18/2017

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 Phone

: (614)280-3338

Fax Number

: (954)208-0845

## LLC DISSOLUTION OR WITHDRAWAL PPF LINCOLN ICP, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
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Corporate Filing Menu

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## **COVER LETTER**

TO: Registration Division of	section Corporations	,	
SUBJECT: PPF Li	ncoln ICP, LLC		
		eign Limited Liability (	Company)
Dear Sir or Madam:			
The enclosed withdra	awal and fee(s) are submitted	for filing.	
Please return all corr	espondence concerning this	matter to the following:	
Gail Freeman			
	(Name of Person)	117.001	
PPF Lincoln ICP, L	rc		
	(Firm/Company)		
3424 Peachtree Roa	d, NE, Suite 900		
	(Address)	•	
Atlanta, GA 30326			
	(City/State and Zip Cod	e)	•
For further informat	ion concerning this matter, p	lease call:	
Gail Freeman		404 at (	846-1363
(N	ame of Person)		Daytime Telephone Number)
Registration Division of Clifton Bui 2661 Exect	Corporations	Regist Divisi P.O. E	ING ADDRESS: ration Section on of Corporations Box 6327 HASSEE, Florida 32314
Enclosed is a check	for the following amount:		
□ \$25 Filling Fee	□ \$30 Filing Fee & Certificate of Status	Cl \$55 Filing Fee & Certified Copy	☐ \$60 Piling Fee, Certificate of Status & Certified Copy

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

PPF Lincoln ICP, LLC		
(Name of limited liability company)		
Delaware		
(Jurisdiction of its organization)		
05/10/2007		
(Date registered with Florida Department of State)	<del></del>	
M07000002835		
(Florida Document Number)		
This limited liability company is withdrawing its certificate of authority in this state.		
Dål Spanar		
(Signature of authorized representative)	74	
Guil Freeman	17 4EC	
(Typed or printed name of signee)	REB. RETA NHAS	er Je
		et me es
:	SEE 6	A Section .
	7 See	
<u>Ģ</u>		<del></del> -

Filing Fee: \$25.00