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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000023 Phone : (614)280-3338

Phone : (614)280-3338 Fax Number : (954)208-0845

## LLC DISSOLUTION OR WITHDRAWAL ARELIA JAMES ISLAND, LLC

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MAR 1 6 2017

## **COVER LETTER**

TO: Registratio	n Section *Corporations			
empreser. Arclis	a James Island, LLC			
(Name of Foreign Limited Liability Company)				
Dear Sir or Madam:				
The enclosed withdr	awal and fee(s) are submitte	d for filing.		
Please return all con	respondence concerning this	matter to the following:		
		· ·		
	Kelly Arrigo			
	(Name of Person)			
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	(Firm/Company)		•	
	7 Giralda Farms	•		
	(Address)			
	Madison, NJ 0794		,	
	(City/State and Zip Cod	ie)		
For further informat	ion concerning this matter, p	slence enll:		
POI futilier tillorinat	ion concerning marianer, p	nedse can,		
	ah Simmons	at ( 973 .	734-1300 Daytime Telephone Number)	
(N	ame of Person)	(Area Code &	Daytime Telephone Number)	
			1110	
STREET/C Registration	COURIER ADDRESS:	MAILING ADDRESS: Registration Section		
	Corporations	Division of Corporations		
Clifton Bui		P.O. Box 6327		
2661 Execu	nive Center Circle	Tallahassee, Florida 32314		
Tallahassec	e, Florida 32301			
Enclosed is a check	for the following amount:	!		
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## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Arelia James Island, LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
May 21, 2007
(Date registered with Florida Department of State)
M07000003006
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
Service
(Signature of authorized representative)
Joanna Mulford, Authorized Person
(Typed or printed name of signee)

Filing Fee: \$25.00

AH 9:53

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