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(Red	questor's Name)	
(Add	iress)	<u></u>
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(City	//State/Zip/Phone	#)
PICK-UP		MAIL
(But	siness Entity Nam	ie)
(Doo	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	
	Office Use Onl	





CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

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ACCOUNT NO. : I2000000195 REFERENCE : 440061 8056587 AUTHORIZATION : Jone Cost LIMIT : \$25.00

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- ORDER DATE : December 28, 2016
- ORDER TIME : 2:22 PM
- ORDER NO. : 440061-050
- CUSTOMER NO: 8056587

FOREIGN FILINGS

NAME: MIAMI AIRPORT COMPLEX II LLC

_____ CORPORATE _____ LIMITED PARTNERSHIP

XXX _ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY

 XX
 PLAIN STAMPED COPY

_____ CERTIFICATE OF STATUS

CONTACT PERSON: Courtney Williams - EXT# 62935

EXAMINER:

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: MIAMI AIRPORT COMPLEX II LLC

(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

· ' ·

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

Please return all correspondence concerning this matter to the following:

(Name of Person)

(Firm/Company)

(Address)

(City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Person)

(Area Code & Daytime Telephone Number)

MAILING ADDRESS:

Division of Corporations

Tallahassee, Florida 32314

Registration Section

P.O. Box 6327

STREET/COURIER ADDRESS:

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

Enclosed is a check for the following amount:

□ \$30 Filing Fee & Certificate of Status Certified Copy

at (

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

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

MIAMI AIRPORT COMPLEX II LLC

(Name of limited liability company)

DELAWARE

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(Jurisdiction of its organization)

05/23/2007

(Date registered with Florida Department of State)

M0700003065

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

/s/ George D. Dabney

(Signature of authorized representative)

George D. Dabney

(Typed or printed name of signee)

FILED

Filing Fee: \$25.00