M07000003310

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	me)	
(Do	cument Number)		
Certified Copies	_ Certificate	s of Status	
Special Instructions to Filing Officer:			





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SECRETARY OF STATE

9 APR 30 AN 9: (

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 185307 4300123

AUTHORIZATION

COST LIMIT (\$ 25.00

ORDER DATE: April 27, 2018

ORDER TIME : 9:23 AM

ORDER NO. : 185307-030

CUSTOMER NO: 4300123

FOREIGN FILINGS

NAME: OPROCK HOLLYWOOD TRS LLC

CORPORATE
LIMITED PARTNERSHIP
XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF STATUS

CONTACT PERSON: Emily Croft - EXT# 62925

EXAMINER:

COVER LETTER

ro: Registration Division of	Section Corporations			
SUBJECT:	OPRO	CK HOLLYWOOD TR	S, LLC	
(Name of Foreign Limited Liability Company)				
Dear Sir or Madam:				
The enclosed withdra	awal and fee(s) are submitte	d for filing.		
Please return all corr	espondence concerning this	matter to the following:		
Keith Wixson				
	(Name of Person)			
Paul Hastings LLP				
	(Firm/Company)			
200 Park Avenue			·	
	(Address)			
New York, NY 101	66			
	(City/State and Zip Cod	e)		
For further informati	on concerning this matter, p	lease call:		
Keith Wixson		212 at (318-6608	
(N	ame of Person)		Daytime Telephone Number)	
STREET/C	COURIER ADDRESS:		ING ADDRESS:	
Registration		Registration Section		
Division of Clifton Bui	Corporations	Division of Corporations P.O. Box 6327		
2661 Execu	itive Center Circle , Florida 32301	Tallahassee, Florida 32314		
Enclosed is a check	for the following amount:			
□ \$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	\$55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Copy	

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

	OPROCK HOLLYWOOD TRS, LLC	
	(Name of limited liability company)	
	Delaware	# K
	(Jurisdiction of its organization)	B Li
	June 4, 2007	3 6
	(Date registered with Florida Department of State)	1 E O
	M07000003310	9
(Florida Document Number)		₩ 8
(If an effective date is more than 90 days afte Note: If the date inser	r than the date of filing: listed, the date must be specific and cannot be prior to der filing.) ted in this block does not meet the applicable statutory sted as the document's effective date on the Department	filing requirements,
	lett M. W.	
Keith M	(Signature of authorized representative) I. Wixson, Authorized Person (Typed or printed name of signee)	
	(Tabled of britined frame of signee)	

Filing Fee: \$25.00