

MO7000003318

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

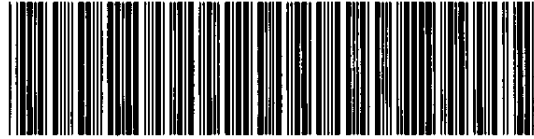
Special Instructions to Filing Officer:

\_\_\_\_\_

\_\_\_\_\_

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Office Use Only



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FILED  
18 APR 30 AM 9:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2018 APR 30 AM 10:43

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

ACCOUNT NO. : I20000000195  
REFERENCE : 185307 4300123  
AUTHORIZATION *Spuddean*  
COST LIMIT : \$25.00

ORDER DATE : April 27, 2018  
ORDER TIME : 9:26 AM  
ORDER NO. : 185307-060  
CUSTOMER NO: 4300123

FOREIGN FILINGS

NAME: OPROCK KEY WEST TRS LLC

CORPORATE  
 LIMITED PARTNERSHIP  
 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

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** OPROCK KEY WEST TRS, 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:

Keith Wixson

\_\_\_\_\_  
(Name of Person)

Paul Hastings LLP

\_\_\_\_\_  
(Firm/Company)

200 Park Avenue

\_\_\_\_\_  
(Address)

New York, NY 10166

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Keith Wixson

\_\_\_\_\_  
(Name of Person)

at ( 212 ) 318-6608  
\_\_\_\_\_  
(Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

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       \$55 Filing Fee & Certified Copy       \$60 Filing Fee, Certificate of Status & Certified Copy

**NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY**

18 APR 30 AM 9:09  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

OPROCK KEY WEST TRS, LLC

\_\_\_\_\_  
(Name of limited liability company)

Delaware

\_\_\_\_\_  
(Jurisdiction of its organization)

June 4, 2007

\_\_\_\_\_  
(Date registered with Florida Department of State)

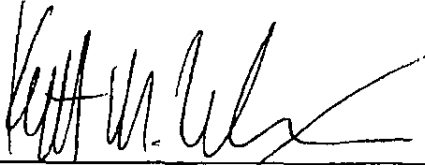
M07000003318

\_\_\_\_\_  
(Florida Document Number)

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

Effective Date, if other than the date of filing: \_\_\_\_\_ (optional)  
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.



\_\_\_\_\_  
(Signature of authorized representative)

Keith M. Wixson, Authorized Person

\_\_\_\_\_  
(Typed or printed name of signee)

**Filing Fee: \$25.00**