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(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
(Only/Otale/Zip// Hone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Business Entity Nume)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE: 919887 AUTHORIZATION COST LIMIT : \$\(^2\)5\\\000000 ORDER DATE: November 17, 2017 ORDER TIME : 1:05 PM ORDER NO. : 919887-005 CUSTOMER NO: 4321791 FOREIGN FILINGS NAME: CUTLER RIVERSIDE DEVELOPER, LLC_ CORPORATE LIMITED PARTNERSHIP XX LIMITED LIABILITY COMPANY XXXX WITHDRAWAL/CANCELLATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: __ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF STATUS

EXAMINER:

CONTACT PERSON: Roxanne Turner - EXT#

COVER LETTER

TO: Registration of Division of	on Section of Corporations		
Cutle SURIFCT:	r Riverside Developer, LLC		
3000001.	(Name of Fo	oreign Limited Liability	Company)
Dear Sir or Madam			
The enclosed withd	Irawal and fee(s) are submitte	ed for filing.	
Please return all co	rrespondence concerning this	s matter to the following	;
Legal Department			
·	(Name of Person)	-	-
Related Companies	S		
	(Firm/Company)		•
60 Columbus Circl	e		
	(Address)		•
New York, NY 100)23		
	(City/State and Zip Coo	de)	-
For further informa	tion concerning this matter, p	olease call:	
Legal Department		212	421-5333
	Name of Person)	(Area Code &)
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:		
S25 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

Cutler Riverside	e Developer, LLC	
	(Name of limited liability company)	
Delaware		
 -	(Jurisdiction of its organization)	
10/17/2007		
	(Date registered with Florida Department of State)	
M07000006234	1	黄蓝
	(Florida Document Number)	<u> </u>
(If an effectiv more than 90 Note: If the d	e, if other than the date of filing:	quirements.
	(Signature of authorized representative)	
	Jennifer McCool, Authorized Representative (Typed or printed name of signee)	
	(1) Speci of printed figure of signee)	

Filing Fee: \$25.00

COVER LETTER

	gistration vision of	Section Corporations		
SUBJECT:	Cutler	Riverside Developer, LLC		
SUBJECT.		(Name of Fo	reign Limited Liabili	ty Company)
Dear Sir or I	Madam:			
The enclosed	d withdra	swal and fee(s) are submitte	ed for filing.	
Please return	all corr	espondence concerning this	matter to the follow	ing:
Legal Depai	rtment			
•		(Name of Person)		_
Related Con	npanies			
		(Firm/Company)		
60 Columbu	ıs Circle			
		(Address)		
New York, I	NY 1002	3		
		(City/State and Zip Coo	le)	
For further in	nformatic	on concerning this matter, p	lease call:	
Legal Depar	tment		212	421-5333
	(Na	me of Person)	at (at (& 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		
		for the following amount:		
🗅 \$25 Filing	Fee	□ \$30 Filing Fee & Certificate of Status	☐ \$55 Filing Fee & Certified Copy	Certificate of Status & Certified Copy