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Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FLAGLER DEVELOPMENT GROUP, LLC

Account Number : 120020000144 Phone : (305)520~2344 Fax Number : (305)520-2400

LLC DISSOLUTION OR WITHDRAWAL FDG FLAGLER CROSSING LLC

Certificate of Status	0
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COVER LETTER

TO: Registratio Division of	n Section Corporations				
SUBJECT: FDG	Flagler Crossing LL0				
	(Name of Fo	reign Limited Liability	Company)		
Dear Sir or Madam:					
The enclosed withdr	awal and fee(s) are submitte	ed for filing.			
Please return all cor	respondence concerning this	matter to the following	ζ;		
Kolleen Cobb					
	(Nume of Person)		-		
	(Firm/Company)		-		
2855 Le Jeune	Rd., 4th Floor			4	
	(Address)		•	26. SE SE	
Coral Gables, I	FL 33134			2015 AUG SECRETA ALLAHAS	7
	(City/State and Zip Coo	le)	•	IAR ASSI	
For further informati	ion concerning this matter, p	olease call:		Y OF S	ר ח
Jessica Alvarea	z	305	520-2366	II: S	
(N	ame of Person)	(Area Code &	Daytime Telephone		
Registration SectionRegistration SectionDivision of CorporationsDivision Of CorporationsClifton BuildingP.O.		LING ADDRESS: tration Section on of Corporations 30x 6327 lassee, Florida 323	s		
Enclosed is a check	for the following amount:				
2 \$25 Filing Fee	☐ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	\$60 Filing For Certificate of Certified Cop	f Status &	

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

FDG Flagler	r Crossing LLC		
	(Name of limited liability company)		
Delaware			
	(Jurisdiction of its organization)		
11/20/2007			
	(Date registered with Florida Department of State)		
M07000006	815		
	(Florida Document Number)		
This limited li	iability company is withdrawing its certificate of authority in	this state.	
	(Signature of authorized representative)	·····	
	Kolleen Cobb, Vice President	7	
	(Typed or printed name of signee)	SECRETARY OF STATE ALLAHASSEE. FLORIDA	FILED

Filing Fee: \$25.00