M0700001064

(Red	questor's Name)			
(Add	dress)			
(Add	dress)			
(City	//State/Zip/Phone	: #)		
PICK-UP	☐ WAIT	MAIL		
(Bus	siness Entity Nam	ne)		
(Do	cument Number)			
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Special Instructions to I	Filing Officer:			
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2015 FEB -3 AM 9 31 SECRETARY OF STATE

15 FEB -3 AM IO: 47

N. Maryon FEB - 4 2015

ACCOUNT NO. : I2000000195

AUTHORIZATION LINE BELLEVICE

COST LIMIT (/) \$ 25.00

REFERENCE : 486986 5012771

ORDER DATE: February 2, 2015

ORDER TIME : 9:32 AM

ORDER NO. : 486986-005

CUSTOMER NO: 5012771

FOREIGN FILINGS

NAME: COLLINS 3300, LLC

XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes - EXT# 62920

EXAMINER:

COVER LETTER

TO:

Registration Section

Division of 0	Corporations		
COLL SUBJECT:	INS 3300, LLC		
	(Name of Fore	eign Limited Liability	Company)
Dear Sir or Madam:			
The enclosed withdra	wal and fee(s) are submitted	for filing.	
Please return all corre	spondence concerning this	natter to the following	:
LISA C. MATTS	ON		
	(Name of Person)		
ACCESS INDUS	STRIES, INC.		
	(Firm/Company)		•
730 FIFTH AVE	NUE, 20TH FLOOR		
	(Address)		•
NEW YORK, NE	EW YORK 10019		
	(City/State and Zip Code	:)	-
For further information	on concerning this matter, pl	ease call:	
LISA C. MATTS	ON	212 at (247-6400
(Na	me of Person)		Daytime Telephone Number)
Registration Division of Clifton Build 2661 Execut Tallahassee.	Corporations	Regist Divisi P.O. E	LING ADDRESS: tration Section on of Corporations Box 6327 nassee, Florida 32314
□ \$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

COLLINS 3300, ELC			
(Name of limited liability company)			
DELAWARE			
(Jurisdiction of its organization)			
12.05.2007			
(Date registered with Florida Department of State)			
M0700007064			
(Florida Document Number)			
This limited liability company is withdrawing its certificate of authority in this state.			
(Signature of authorized representative)		2015 FEB	71
PETER L. THOREN	為對	ຜ່	
(Typed or printed name of signee)	EN FLORD	3 M 9:36	ED

Filing Fee: \$25.00