## 11810000000

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only

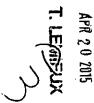


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SEURETARY OF STATE TALLAHASSEE, FLORID

FILED 15 MAR 30 PM 4: 15



## COVER LETTER

Division of	Section Corporations		
Gaine SUBJECT:	esville Hotel Group, L	LC	
Sobject,	(Name of For	eign Limited Liability (	Company)
Dear Sir or Madam:			·
The enclosed withdra	awal and fee(s) are submitte	d for filing.	
Please return all corre	espondence concerning this	matter to the following:	:
P. Case Aiken,	11		
	(Name of Person)		
Moses & Aiken,	LLC		
<del></del>	(Firm/Company)		
11300 Rockville	e Pike, Suite 1015		
	(Address)		
Rockville, MD 2	0852		
	(City/State and Zip Cod	le)	
For further informati	on concerning this matter, p	lease call:	
P. Case Aiken,	II	301	468-0080
(Na	ame of Person)		Daytime Telephone Number)
Registration Division of Clifton Buil 2661 Execu	Corporations	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	<b>△</b> \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Copy

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## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Gainesville Hotel Group, LLC
(Name of limited liability company)
Maryland
(Jurisdiction of its organization)
04/15/2008
(Date registered with Florida Department of State)
M0800001811
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
(Signature of authorized representative)
P. Case Aiken, II
(Typed or printed name of signee)

Filing Fee: \$25.00