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(Re	questor's Name)					
(Ad	dress)					
(Ad	dress)					
(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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SECRETARISMENT OF BLOKEDA

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D. SCOTT APR 2 8 2017

COVER LETTER

TO:	Registration Division of	n Section Corporations	•				
SUBJE	CCT:	FQP-LA (Name of Fo	Orlando reign Limited Lia			he.	
Dear Si	ir or Madam:						
						•	
the end	closed withdra	awal and fee(s) are submitte	ed for filing.				
Please	return all corr	espondence concerning this	matter to the foll	owing:			
		Lamar Maddo (Name of Person)	<u> </u>	 .			
	>						
	Thom	(Firm/Company)	velopment				
	45	Ansky Drive (Address)					
	New	Man GA 3020 (City/State and Zip Cod	(e)				
For furt	her informatio	on concerning this matter, p	lease call:		•	SECRET SECRET	피
	Lam	ar Maddox	at (<u>18</u>)	423-544	5/2 25	
	(Na	une of Person)	(Area C	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			STATE STATE)
Enclose	ed is a check t	for the following amount:					
□ \$25 I	Filing Fee	□ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fe Certified Cop	y Cer	O Filing Fee, rtificate of Status & rtified Copy	ě	

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

FOR-LA Orlando Ventures Manager LLC (Name of limited liability company)	,
Georgia (Jurisdiction of its organization)	
June 3, 2008 (Date registered with Florida Department of State)	
MOSODOD Z SQD (Florida Document Number)	
This limited liability company is withdrawing its certificate of authority in this sta	ite.
13T	
(Signature of authorized representative)	-
Stanky E. Thomas (Typed or printed name of signee)	TAES
	FILED MR 25 PM MRSSESS
	ED S PH 2:0 YER STATE

Filing Fee: \$25.00