

MO8000005049

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

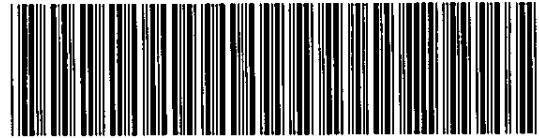
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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2015 FEB -3 AM 11:29

RECEIVED

15 FEB -3 AM 10:48

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DIVISION OF CORPORATIONS

FEB 04 2015  
J. BRUCE

ACCOUNT NO. : I20000000195

REFERENCE : 487398 7477555

AUTHORIZATION

COST LIMIT \$ 25.00

*Lynne Coleman*

ORDER DATE : February 3, 2015

ORDER TIME : 9:12 AM

ORDER NO. : 487398-010

CUSTOMER NO: 7477555

FOREIGN FILINGS

NAME: PCA DOLPHIN REEF, LLC

☐ CORPORATE  
☐ LIMITED PARTNERSHIP  
☒ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY  
☒ PLAIN STAMPED COPY  
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Courtney Williams - EXT# 62935

EXAMINER: \_\_\_\_\_

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2015 FEB -3 AM 11:29  
CLERK OF STATE  
TALLAHASSEE FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** PCA DOLPHIN REEF, LLC  
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

\_\_\_\_\_  
(Name of Person)

PCA DOLPHIN REEF, LLC

\_\_\_\_\_  
(Firm/Company)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

\_\_\_\_\_  
(Name of Person) at (\_\_\_\_\_) \_\_\_\_\_  
(Area 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

Enclosed is a check for the following amount:

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|--|---|--|--|

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2015 FEB -3 AM 11:29  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

PCA DOLPHIN REEF, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

November 17, 2008

(Date registered with Florida Department of State)

M08000005049

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

(Signature of authorized representative)

Please see attached signature page

(Typed or printed name of signee)

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TALLAHASSEE FLORIDA

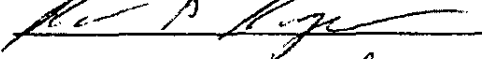
**Filing Fee: \$25.00**

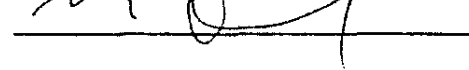
Executed on this 3 day of February, 2015

PCA DOLPHIN REEF, LLC, a Delaware limited liability company

By: PRINCIPAL REAL ESTATE INVESTORS, LLC, a Delaware limited liability company, its authorized signatory

Robert G. Roepsch  
Equity Real Estate Administrator

By: 

By: 

Morgan M. Deal  
Director  
Acquisitions/Dispositions

FILED

2015 FEB - 3 AM 11: 29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA