12/5/2016

Division of Corporations

## lering Department of State Desision of Corporations ectronic State Cover Specific

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338

Fax Number : (614)280-3338 Fax Number : (954)208-0845

LLC DISSOLUTION OR WITHDRAWAL DORAL E2 PHASE LLC

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**COVER LETTER** 

	egistration ivision of	Section Corporations		
SUBJECT	Doral E	2 Phase LLC		
		(Name of For	eign Limited Liability	Company)
Dear Sir or	Madam:			
The enclos	ed withdra	wal and fee(s) are submitte	d for filing.	
Please retu	rn pli corr	espondence concerning this	matter to the following	r.
Tara Nyac	k			
	<u> </u>	(Name of Person)		_
Stroock &	Stronek é	k Lavan LLP		_
		(Pirn/Company)		
180 Maide	n Lane, R	aom 3916		-
		(Address)		
New York	, NY 100			_
		(City/State and Zip Cod	le}	
For further	informati	on concerning this matter, p	lease call:	
New York	, NY 1003	38	at ( <sup>212</sup>	) 806,5630
	(Ň	ane of Person)	(Area Codo A	E Daytime Telephone Number)
R D C 20	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		stration Section ion of Corporations Box 6327	
Enclosed i	s a check	for the following amount:		
□ \$25 Fill	ng Fee	☐ \$30 Filing Fee & Certificate of Status	S55 Piling Fee &. Certified Copy	© \$60 Piling Fee, Certificate of Status & Certified Copy

ſΟV

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Doral E2 Phase LLC
(Name of lunited liability company)
Delawārā
(Jurisdiction of its organization)
June 26, 2009
(Date registered with Florida Department of State)
M0900002470
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
- Call
(Signature of authorized representative)
Ethel Gayrilova, Authorized Person
(Typed or printed name of signee)

Filing Fee: \$25.00

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