M0900002556

(Requestor's Name)
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ON SERVICE COMPANY
ACCOUNT NO. : 12000000195
REFERENCE : 386573 4304492
AUTHORIZATION: melbelle man
COST LIMIT : \$ 25.00
ORDER DATE: November 20, 2014
ORDER TIME : 12:08 PM
ORDER NO. : 386573-010
CUSTOMER NO: 4304492
FOREIGN FILINGS
NAME: CARRIAGE COVE PH TRS, LLC
CORPORATE LIMITED PARTNERSHIP XXX LIMITED LIABILITY COMPANY
XXXX WITHDRAWAL/CANCELLATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF STATUS
CONTACT PERSON: Courtney Williams - EXT# 62935

EXAMINER:

COVER LETTER

Division of	of Corporations				
Car	riage Cove PH TRS,	LLC			
	(Name of F	oreign Limited Liabilit	y Company)	-	
Dear Sir or Madam	:				
The enclosed without	frawal and fee(s) are submit	ed for filing.			
Please return all co	rrespondence concerning th	is matter to the following	ng:		
Ruth A. Corde	es				
	(Name of Person)		-		
DLA Piper LLF	P (US)				
	(Firm/Company)	· · · · · · · · · · · · · · · · · · ·	_		
203 N. LaSalle	St., Suite 1900				
	(Address)		_		
Chicago, IL 60	601				
	(City/State and Zip Co	de)	and the state of t		
or further informat	tion concerning this matter,	please call:			
Ruth A. Corde	S	312 at (368-2151		
(1)	lame of Person)		& Daytime Telephone Number)		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahasses, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		galaga 🛶	
	for the following amount:				<i></i>
3 \$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	2 \$55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Copy	14 MOV 20 AH II: 4€ CORETARY OF STATE LI \$ PASSEE, FLORIO:	

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Carriage Cove PH TRS, LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
July 1, 2009
(Date registered with Florida Department of State)
M0900002556
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
Vmc23ll
(Signature of authorized representative)
James R. Goldman, President and Authorized Representative
(Typed or printed name of signee)

Filing Fee: \$25.00

14 HOV 20 AH III: 45