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CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

> ACCOUNT NO. : I20000000195 REFERENCE : 419363 7329463 AUTHORIZATION COST LIMIT : \$ 25.00

ORDER DATE : December 13, 2016

ORDER TIME : 9:37 AM

.

ORDER NO. : 419363-020

CUSTOMER NO: 7329463

.• i

FOREIGN FILINGS

NAME: FL 10605 DEERWOOD PARK BOULEVARD 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: Melissa Zender - EXT#

EXAMINER:

COVER LETTER

TO: Registration Section Division of Corporations

FL 10605 DEERWOOD PARK BOULEVARD LLC SUBJECT:

(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:

Linda A. Klang

(Name of Person)

Lehman Brothers Holdings Inc.

(Firm/Company)

101 Hudson Str, 38th Floor - Tax Department

(Address)

Jersey City, NJ 07302

(City/State and Zip Code)

For further information concerning this matter, please call:

Linda A. Klang

(Name of Person)

201 526-1484 at (_____)

rson)

(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:

S25 Filing Fee	🖬 \$30 Filing Fee &	🖵 \$55 Filing Fee &	□ \$60 Filing Fee,
	Certificate of Status	Certified Copy	Certificate of Status &
			Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

FL 10605 DEERWOOD PARK BOULEVARD LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

01/11/2010

(Date registered with Florida Department of State)

M1000000115

(Florida Document Number)

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

(Signature of authorized representative)

Linda A. Klang, VP & Assistant Treasurer of Member

(Typed or printed name of signee)

FILED 16 DEC 14 MH 8: 17 JUNISION OF LOWERS VIEWS

Filing Fee: \$25.00