

M10000004296

(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



200255872452

01/24/14--01028--002 **150.00

2014 JAN 24 AM 11:31
CLERK OF STATE
TALLAHASSEE FLORIDA

FILED

JAN 29 2014

5.0000

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BH-AW FMC North, 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:

Patricia Flournoy

(Name of Person)

Behringer

(Firm/Company)

15601 Dallas Parkway, Suite 600

(Address)

Addison, TX 75001

(City/State and Zip Code)

For further information concerning this matter, please call:

Patricia Flournoy

(Name of Person)

at (469) 341-2342

(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:

- ☒ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

FILED
2014 JAN 24 AM 11:31
CLERK OF STATE
TALLAHASSEE, FLORIDA

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

BH-AW FMC North, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

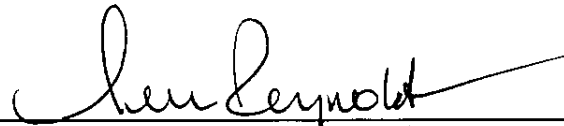
9/28/2010

(Date registered with Florida Department of State)

M10000004296

(Florida Document Number)

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



(Signature of authorized representative)

Terri Warren Reynolds

(Typed or printed name of signee)

FILED
2014 JAN 24 AM 11:31
CLERK OF STATE
TALLAHASSEE FLORIDA

Filing Fee: \$25.00