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TEPLES EN OF STATE OF

D. SCOTT DEC 2 8 2016 CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 437268 7736440

AUTHORIZATION : Commelle of the comments of th

COST LIMIT : (\$\\25\.00

ORDER DATE: December 23, 2016

ORDER TIME : 9:22 AM

ORDER NO. : 437268-020

CUSTOMER NO: 7736440

FOREIGN FILINGS

NAME: SASOF TR-27, 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

4.3

TO:	Registration Division of	Section Corporations			
SUBJE	SASC	OF TR-27, LLC			
SOLUTION	C1	(Name of For	eign Limited Liability (Company)	
Dear Sir	r or Madam:				
The enc	losed withdra	awal and fee(s) are submitted	d for filing.		
Please re	eturn all corre	espondence concerning this	matter to the following:		
Lisa E	Baptiste				
		(Name of Person)			
Apollo	o Aviation	Group, LLC			
		(Firm/Company)			
848 B	Brickell Ave	enue, Suite 500			
		(Address)			
Miam	i, FL 3313	31			
		(City/State and Zip Cod	e)		
For furt	her information	on concerning this matter, p	lease call:		
Lisa E	3aptiste		786	476-2383	المعالم
	(Na	ame of Person)		Daytime Telephone Number)	A R T
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		C 27 M 9 43	
		for the following amount:			
□ \$25 F	Filing Fee	□ \$30 Filing Fee & Certificate of Status	☐ \$55 Filing Fee & Certified Copy	\$60 Filing Fee, Certificate of Status &	

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

ASOF TR-27, LLC	
(Name of limited liability company)	
ELAWARE	
(Jurisdiction of its organization)	
4 November 2010	
(Date registered with Florida Department of State)	
110000005489	
(Florida Document Number)	
nis limited liability company is withdrawing its certificate of authority in this state.	
AL.	
(Signature of authorized representative)	
Robert G. Korn	
(Typed or printed name of signee)	

Filing Fee: \$25.00