

M11000000431

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

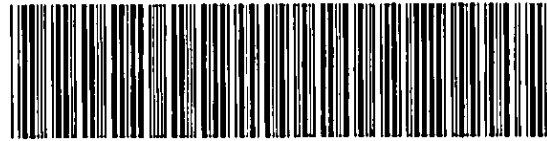
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700304851097

11/03/17--01002--016 \*\*25.00

DIVISION 3

17 NOV 3 AM 11:20

FILED

O. SIMMONS  
NOV 03 2017

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DP Fitness Centers, 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:

Sue Larson  
\_\_\_\_\_  
(Name of Person)

Duke Realty Corporation  
\_\_\_\_\_  
(Firm/Company)

3715 Davinci Court, Suite 300  
\_\_\_\_\_  
(Address)

Peachtree Corners, GA 30092  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Sue Larson \_\_\_\_\_ at ( 770 ) 638-2633  
(Name of Person) (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

**NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY**

DP Fitness Centers, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

January 27, 2011

(Date registered with Florida Department of State)

M11000000431

(Florida Document Number)

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

*Angela Hsu*

(Signature of authorized representative)

Angela Hsu

(Typed or printed name of signee)

**Filing Fee: \$25.00**

RECEIVED

17 NOV - 3 AM 11:28

FILED