

| (Re                     | questor's Name)    | <del></del> |  |  |
|-------------------------|--------------------|-------------|--|--|
| (Ad                     | dress)             |             |  |  |
| (Address)               |                    |             |  |  |
| (Cit                    | ty/State/Zip/Phone | #)          |  |  |
| PICK-UP                 | ☐ WAIT             | MAIL        |  |  |
| (Bu                     | siness Entity Nam  | e)          |  |  |
| (Document Number)       |                    |             |  |  |
| Certified Copies        | _ Certificates     | of Status   |  |  |
| Special Instructions to | Filing Officer:    |             |  |  |
|                         |                    |             |  |  |
|                         |                    |             |  |  |
|                         |                    |             |  |  |

Office Use Only



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2017 FED 16 P 4: 28
SECKETARY OF STATE
ALL ANASSEF FLORIDA

n BRUCE FEB 17 2017



## **COVER LETTER**

| TO: Registration Division of                              | Section<br>Corporations                      |                                    |  |                                |       |
|---|--|------------------------------------|--|--------------------------------|-------|
| DP W  | eston Pointe II, LLC                         |                                    |  |                                |       |
|   | (Name of Fo                                  | reign Limited Liability (          | Company)   | <del></del>                    |       |
| Dear Sir or Madam:  |  |                                    |  |                                |       |
| The enclosed withdra                                      | awal and fee(s) are submitte                 | ed for filing.                     |  |                                |       |
| Please return all corr                                    | espondence concerning this                   | matter to the following            | :  |                                |       |
| Sue Larson  |  |                                    |  |                                |       |
| - <u>.</u>  | (Name of Person)                             |                                    |  |                                |       |
| Duke Realty Co  | orporation                                   |                                    |  |                                |       |
|   | (Firm/Company)                               |                                    |  |                                |       |
| 3715 Davinci C  | ourt, Suite 300                              |                                    |  |                                |       |
|   | (Address)                                    |                                    | -  |                                |       |
| Peachtree Corr  | ners, GA 30092                               |                                    |  | 201<br>SE                      |       |
|   | (City/State and Zip Coo                      | de)                                | •  | 2017 FEB<br>SECKETA<br>ALLAHAS | <br>i |
| For further informati                                     | on concerning this matter, p                 | olease call:                       |  | B 16                           |       |
| Margaret Englis   | sh   | 770                                | 717-2429   | F ST #                         | C     |
| (Na   | ame of Person)                               |                                    | Daytime Telephone Num  | 26<br>bei10A                   |       |
| Registratior<br>Division of<br>Clifton Buil<br>2661 Execu | Corporations                                 | Regist<br>Divisi<br>P.O. F         | ING ADDRESS:<br>ration Section<br>on of Corporations<br>Box 6327<br>assee, Florida 32314 |                                |       |
| Enclosed is a check                                       | for the following amount:                    | 1                                  |  |                                |       |
| <b>△</b> \$25 Filing Fee                                  | □ \$30 Filing Fee &<br>Certificate of Status | □ \$55 Filing Fee & Certified Copy | □ \$60 Filing Fee,<br>Certificate of State<br>Certified Copy                             | us &                           |       |

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

DP Weston Pointe II, LLC

| (Name of limited liability company)   |                           |
|---|---------------------------|
| Delaware  |                           |
| (Jurisdiction of its organization)  |                           |
| January 31, 2011  |                           |
| (Date registered with Florida Department of State)                            |                           |
| M1100000466   |                           |
| (Florida Document Number)   |                           |
| This limited liability company is withdrawing its certificate of authority in | this state.               |
| Angelo Asn (Signature of authorized representative)                           | <b>201</b><br>S.C.<br>TAL |
| (Signature of authorized representative)                                      | 2017 FEB                  |
| Angela Hsu  | OIT FEB 15 F              |
| (Typed or printed name of signee)   | γο: SI                    |

Filing Fee: \$25.00