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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

## LLC DISSOLUTION OR WITHDRAWAL ORANGE BOWL EASTERN III, L.L.C.

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## **COVER LETTER**

		Section Corporations	•					
SUBJECT:	Orange	Bowl Eastern III, L.L.C.						
SOBJECT.	(Name of Foreign Limited Liability Company)							
Dear Sir or I	Madam:							
The enclose	d withdra	iwal and fee(s) are submitte	ed for filing.					
Please return	all com	espondence concerning this	s matter to the followin	<b>8</b> :				
Rima Quad								
		(Name of Person)	<del> </del>	-				
King Street	Capital l	Management, L.P.						
		(Firm/Company)		_				
299 Park A	v <b>е</b> пие, 40	)th						
		(Address)		_				
New York,	NY 1017	71						
-		(City/State and Zip Con	de)	<del></del>				
For further i	nformati	on concerning this matter,	please call:					
Rima Quad			(646) at (	289-7582				
	(Nt	ime of Person)		& Daytime Telephone Number)				
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Enclosed is	a check	for the following amount	:					
□\$25 Filin	g 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

Orange Bowl Eastern III, L.L.C.			
(Name of limited liability company)			-
Delaware			
(Jurisdiction of its organization)			_
02/07/201 i			
(Date registered with Florida Department of State)			_
M11000000598			
(Florida Document Number)			_
This limited liability company is withdrawing its certificate of authority in this state. Effective Date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of more than 90 days after filing.)  Note: If the date inserted in this block does not meet the applicable statutory filing this date will not be listed as the document's effective date on the Department of States.	(option of filing require	g or ements	- -
don't		FB H	
(Signature of authorized representative)	•	H	, ï
Michael P. Wengrofsky		φ 23	
(Typed or printed name of signee)		20	

Filing Fee: \$25.00