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CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT	NO.	:	120000000195

REFERENCE : 723177 5043125

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: April 11, 2019

ORDER TIME : 12:32 PM

ORDER NO. : 723123-005

CUSTOMER NO: 5043125

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## FOREIGN FILINGS

NAME: ZIFF BROTHERS INVESTMENTS,

L.L.C.

CORPORATE
LIMITED PARTNERSHIP
XX 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: Roxanne Turner - EXT#

EXAMINER:

## **COVER LETTER**

Division o	n Section f Corporations		
	rothers Investments, L.L.C.		
SUBJECT:	(Name of Fo	reign Limited Liability	Company)
Dear Sir or Madam			
The enclosed withd	rawal and fee(s) are submitte	ed for filing.	
Please return all cor	respondence concerning this	s matter to the following	g:
Tom Stevenson			
	(Name of Person)		_
Ziff Brothers Inves	tments, L.L.C.		
	(Firm/Company)		_
350 Park Avenue, 4	th Floor		
	(Address)		_
New York, NY 100	22		
	(City/State and Zip Co	le)	_
For further informat	ion concerning this matter, p	olease call:	
Tom Stevenson		212	292-5823
(N	ame of Person)	at (at (Area Code &	Daytime Telephone Number)
Registratio Division of Clifton Bui 2661 Exect Tallahassed	Corporations Iding ative Center Circle r. Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check  □ \$25 Filing Fee	or the following amount:  □ \$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

Ziff Brothers Investments, L.L.C.	
(Name of limited liability company)	
Deławare	
(Jurisdiction of its organization)	
November 22, 1994	
(Date registered with Florida Department of State)	
M11000003685	
(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:	g or rements,
(Typed or printed name of signee)	40 B

Filing Fee: \$25.00

HAPRIZ AHII: