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2016 JUN 16 A 8: 43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEPARIMENT OF STATE

WALE MANCE

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 18207/1 7477555

AUTHORIZATION : THE BELLEN

COST LIMIT : \$ 25.00

ORDER DATE: June 16, 2016

ORDER TIME : 10:42 AM

ORDER NO. : 182074-010

CUSTOMER NO: 7477555

FOREIGN FILINGS

NAME: GA LB MCLEOD ROAD, LLC

CORPORATE
LIMITED PARTNERSHIP
XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF STATUS

CONTACT PERSON: Melissa Zender - EXT# 62956

EXAMINER:

COVER LETTER

TO: Registratio	n Section f Corporations				
GA L	B MCLEOD ROAD,	LLC			
SUBJECT.	(Name of Fo	reign Limited Liability	Сотралу)		
Dear Sir or Madam:					
The enclosed withdr	rawal and fee(s) are submitte	ed for filing.			
Please return all cor	respondence concerning this	matter to the following	g:		
Robert Roepso	ch				
	(Name of Person)		_		
GA LB MCLEC	DD ROAD, LLC				
	(Firm/Company)		_	77. 22	
801 Grand Ave) .			MLCAETARY SLORETARY	-1
	(Address)		-		-
Des Moines, IA 50392		•		SEE A	
	(City/State and Zip Coo	le)	.		C
For further informat	ion concerning this matter, p	olease call:		RIDA	
Robert Roepso	:h	515	283-5508		
(N	ame of Person)	at (at (Area Code &	& Daytime Telephone Number	·)	
Registratio Division of Clifton Bui 2661 Exect	Corporations	Regis Divis P.O. 1	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, 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 of Certified Copy	&	

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

GA LB MCL	EOD ROAD, LLC		
	(Name of limited liability company)		•
Delaware			
	(Jurisdiction of its organization)	<u> </u>	
August 5, 20	011		
	(Date registered with Florida Department of State)		
M110000039	935		
<u> </u>	(Florida Document Number)		-
	(Signature of authorized representative)		
	Please see attached signature page		
	(Typed or printed name of signee)		
		7A. S.	
		2016 JUN 16 SECRETARY ALLAHASSER	F-74
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Filing Fee: \$25.00