4/6/2017

Division of Corporations



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 Phone

: (614)280-3338

Fax Number

: (954)208-0845

## LLC DISSOLUTION OR WITHDRAWAL PENINSULA PROPERTY HOLDINGS IX, LLC

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To: Page 3 of 4

## COVER LETTER

	, – •	OVER DELIER	
TO: Registration Section Division of Corporation	ons		
SUBJECT: PENINS	ULA PRI	UPEKTY HOLL	MAGS IX, LLC
	(Name of Fo	reign Limited Liability C	ompany)
Dear Sir or Madam:			
The enclosed withdrawal and for	e(s) are submitte	ed for filing.	
Please return all correspondence	ce concerning this	matter to the following:	
Causas An	ne of Person)	<u>42-42</u>	Lecal
Flirena Ca	DM_KLNU &	was sti	US.
120 COEC	in Local	1), Suite	Œ
(City) FC	3333 y/State and Zip Cod	(de)	
For further information concern	oing this matter, p	please call:	
Source Lead (Name of Pers	SoleT(>	at ( 305) (Area Code &	Daytime Telephone Number)
STREET/COURIER Registration Section Division of Corporation Clifton Building		Registr Divisio	ING ADDRESS: ration Section on of Corporations ox 6327
2661 Executive Center Tallahassee, Florida 3		Tallahi	assee, Florida 32314
Enclosed is a check for the fo		<b>:</b>	
	Filing Fee & ificate of Status	S55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status &

Certified Copy

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## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

PENINSULA PROPERTY HOLDINGS IX, LLC	
(Name of limited liability company)	
School ATE	
(Jurisdiction of its organization)	
E-346-9011	
(Date registered with Florida Department of State)	
M 11 000004310	
(Florida Document Number)	
This limited liability company is withdrawing its certificate of authority in this state.	
Jal -	
(Signature of authorized representative)	
Janks & BriER	
(Typed or printed name of signee)	7

Filing Fee: \$25.00