## M11000004525

(Requestor's Name)
(Address)
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(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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SECRETARY OF STATE
TALLAHASSEE FI TARIE

A CHARGE FEB 0 3 2015

•
ACCOUNT NO. : I2000000195
REFERENCE : 486348 7562867
AUTHORIZATION: Spelle Rear
COST LIMIT : \$ 25.00
ORDER DATE : February 2, 2015
ORDER TIME : 1:07 PM
ORDER NO. : 486348-005
CUSTOMER NO: 7562867
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
FOREIGN_FILINGS
NAME: AP MCD ASHTON PARK LLC
CORPORATE LIMITED PARTNERSHIP XXX 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: Emily Gray - EXT# 62925
EXAMINER:

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

AP MCD A	SHTON PARK LLC			
	(Name of limited liability company)			<del>-</del>
DE				
	(Jurisdiction of its organization)	<del></del>		
09/09/2011				
	(Date registered with Florida Department of State)	F.		
M11000004	1529			
	(Florida Document Number)			_
This limited	liability company is withdrawing its certificate of authority in this state	E.		
	(Signature of authorized representative)	<b>5</b>		
	Charles Koslosky		35	
	(Typed or printed name of signee)	REFARY OF STATE AHASSEE, FLORID	FEB -2 PM 12: 52	STATES

Filing Fee: \$25.00