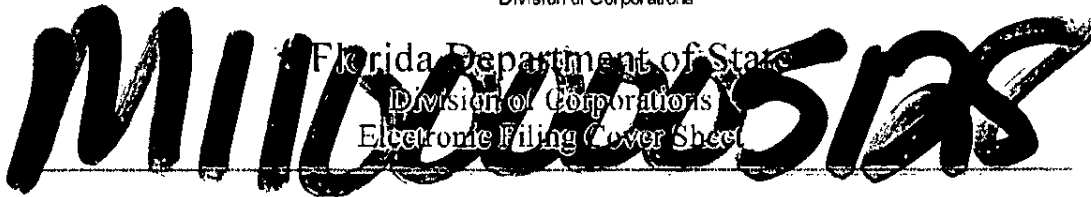


1/10/2017

Division of Corporations



Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (614)280-3338  
Fax Number : (954)208-0845

**LLC DISSOLUTION OR WITHDRAWAL  
RRE CAMPUS CLUB HOLDINGS, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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D. BRUCE  
JAN 11 2017

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** RRE Campus Club Holdings, LLC  
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Aldie Loubier

(Name of Person)

RRE Campus Club Holdings, LLC

(Firm/Company)

1845 Walnut Street - 18th Floor

(Address)

Philadelphia, PA 19103

(City/State and Zip Code)

For further information concerning this matter, please call:

Aldie Loubier

(Name of Person)

at 215 209-4424  
(Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, 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 & Certified Copy

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## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

RRE Campus Club Holdings, LLC

(Name of limited liability company)

Florida

(Jurisdiction of its organization)

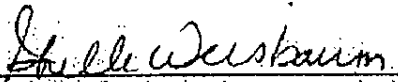
October 12, 2011

(Date registered with Florida Department of State)

M11000005128

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state

  
(Signature of authorized representative)

Shelle Weisbaum

(Typed or printed name of signee)

**FILED**  
2017 JAN 10 P 3:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00