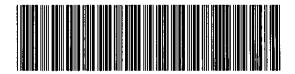
# 11/10000054/4

(Re	equestor's Name)		
(Ad	ldress)		
(Ad	dress)		
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to	Filing Officer:		

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SECRETARY OF STATE TALLAHASSEE, FLORIDS

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K. SALY DEC 30 2016

# **CT CORP**

## 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724 850-508-1891 (cell)

Date:	12/29/	طا حَدَّ. ا20160000072	_	4:1 DU
Name:	Pines (i	Ly Center Re	sidences	Phase
Document #:				
Order #:	70643	932		
Certified Copy of Arts & Amend: Plain Copy:				
Certificate of Good Standing:			<del></del>	
Apostille/Notarial Certification:		Country of Destination: Number of Certs:		
Filing	Certified: Plain: COGS:			
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount: \$	55	<u>-</u>	

Thank you!

# COVER LETTER

	tion Section of Corporations		
SUBJECT: Pin	es City Center Residences Phase	ILLC	
	(Name of Fore	eign Limited Liability (	Company)
Dear Sir or Mada	m:		
The enclosed wit	ndrawal and fee(s) are submitted	for filing.	
Please return all	correspondence concerning this i	matter to the following:	
Patricia McBrati	ey		
	(Name of Person)		
Pines City Cente	r Residences Phase I LLC		
	(Firm/Company)		
c/o Pines City C	enter Residences LLC, 2255 Gla	des Road, 423A	
	(Address)		
Boca Raton, FL	33431		
	(City/State and Zip Code	:)	
For further inform	nation concerning this matter, pl	ease call:	
Charlotte E. Wo	verton, Jones Day Paralegal	214 at (	969-4567 )
	(Name of Person)	(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 ch	eck 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

FILED
2016 DEC 29 AM 8: 47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

### NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

	(Name of limited liability company)
Dalassana	
Delaware	(Jurisdiction of its organization)
	(Julisaiction of its organization)
October 26, 20	11
	(Date registered with Florida Department of State)
M1100000541	4
	(Florida Document Number)
his limited lia	bility company is withdrawing its certificate of authority in this state.
	HILD
	(Signature of authorized representative) s City Center Residences LLC, its Sole Member, BY: MCRT Pembroke Pines LLC, Managing Member icia McBratney, Chief Administrative Officer and Secretary
	(Typed or printed name of signee)

Filing Fee: \$25.00