M11000005515

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
 -					

Office Use Only



500304457905



7 OCT 31 PM 7: 13



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM

Account#: I20000000088

Date: October 31, 2017	Account#. 120000000000
Name: Marisa Kugelmann	
Reference #: D309233	
Entity Name: REFLECTIONS PROPERTY LL., LLC	<u>2</u>
Articles of Incorporation/Authorization to Transact Busine	SS
Amendment	
☐ Change of Agent	
Reinstatement	
Conversion	
☐ Merger	
✓ Dissolution/Withdrawal	
☐ Fictitous Name	
Other	
Authorized Amount: \$\frac{16.25.00}{25.00}	

I■ CORPORATE HQ COGENCY GLOBALING. 10 E 40 | \$1,10 1FL NY, NY 10016 800,221,0102 -1.212.947.7200

EUROPEAN HO

COGENCY GLOBAL (US) (IM TED STONERED MENGLAND AWARDS (SEGNARY SEDIA). 6 BEMIS MARKS 1915E LONDON EC3A 784 +44 (0)20.3786.1090

PASIA PACIFIC HQ

COGENCY GLOBAL (HK) UMITED AHOMO KONGLAMTED COVERNO INFENTIUS PLAZA, 12 TE, 199 DES MOEUX RO CENTRAL HONG KONG +852.3975.1803



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM |

COVER LETTER

TO:	Registration Division of 0			
SUBJEC	ЭТ:	Reflect	ions Property LL	, LLC
(, (, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	<u> </u>	(Name of Fore	ign Limited Liability Co	ompany)
Dear Sir	or Madam:			
The encl	losed withdra	wal and fee(s) are submitted	for filing.	
Please re	etum all corre	spondence concerning this n	natter to the following:	
		Colleen Humes	5	
_		(Name of Person)		
	Co	gency Global I	nc.	
		(Firm/Company)		
	850 I	New Burton Rd	#201	
		(Address)		
	[Dover, DE 1990	4	
		(City/State and Zip Code)	
For furth	ner informatic	on concerning this matter, ple	ase call:	
		Jill A. Russo	at (212)	295-2742
	(Na	me of Person)	(Area Code & D	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		
Enclose	d is a check t	or the following amount:		
\$25 F	iling Fee	\$30 Filing Fee & Certificate of Status	\$55 Filing Fee & Certified Copy	\$60 Filing Fee. Certificate of Status & Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Reflections Property LL, LLC			
(Name of limited liability company)			Ī
Delaware			
(Jurisdiction of its organization)			T
11/2/2011			1
(Date registered with Florida Department of State)			Ī
M11000005515			
(Florida Document Number)			1
This limited liability company is withdrawing its certificate of authority in this state. Effective Date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be prior to date of more than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory filing this date will not be listed as the document's effective date on the Department of States.	(optional) of filing (or nents	
(Signature of authorized representative) Jill A. Russo (Typed or printed name of signee)	SECRETARY OF CITTE	17 OCT 31 PM 7: 13	

Filing Fee: \$25.00