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COVER LETTER

TO: Registration Section Division of Corporations		
WATERFRON	IT HOSPITALITY MANAGEMENT LLC	
SUBJECT: Name of For	reign Limited Liability Company)	
Dear Sir or Madam:		
The enclosed withdrawal and fee(s) are submitted	d for filing.	
Please return all correspondence concerning this	matter to the following:	
Olympia Charach		
(Name of Person)		
Capitol Services – Corporate Filings (Firm/Company)	s Team	16
206 E 9th St, Ste 1300 (Address)		16 APR 15 AM 10: 02
Austin TX 78701 (City/State and Zip Cod	14)	AM 10: 0
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For further information concerning this matter, p	please call:	
	at (800) 345-4647	
(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 check for the following amount:	:	
X \$25 Filing Fee \$30 Filing Fee & Certificate of Status	S55 Filing Fee & S60 Filing Fee, Certified Copy Certificate of Status & Certified Copy	

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