

M11000006288

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

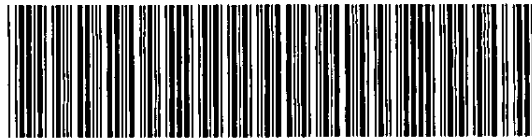
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800278816168

RECEIVED
DEPARTMENT OF
REVENUE

15 NOV -4 PM 4:21

TO ADAM J. BURG
SUFFICIENT FILING

FILED

15 NOV -4 AM 9:57

CLERK OF STATE
TALLAHASSEE, FLORIDA

NOV 05 2015

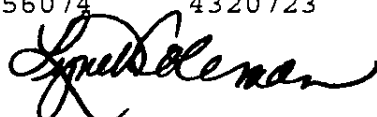
Y SULKER

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 856074 4320723

AUTHORIZATION :



COST LIMIT : \$ 25.00

ORDER DATE : November 1, 2015

ORDER TIME : 3:43 PM

ORDER NO. : 856074-035

CUSTOMER NO: 4320723

FOREIGN FILINGS

NAME: IIT MIAMI DC LLC

☐ CORPORATE
☐ LIMITED PARTNERSHIP
☒ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Melissa Zender - EXT# 62956

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: IIT Miami DC 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:

(Name of Person)

(Firm/Company)

(Address)

(City/State and Zip Code)

For further information concerning this matter, please call:

_____ at (_____) _____
(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:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &
Certified Copy | <input type="checkbox"/> \$60 Filing Fee,
Certificate of Status &
Certified Copy |
|--|---|--|--|

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

IIT Miami DC LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

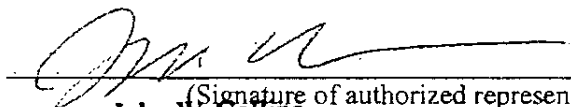
12/16/2011

(Date registered with Florida Department of State)

M11000006288

(Florida Document Number)

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



(Signature of authorized representative)
John W. Collins,
An Authorized Person

(Typed or printed name of signee)

FILED
15 NOV -4 AM 9:57
CLERK OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00