

M12000000819

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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H140002849733ABCS

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To:

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

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
Fax Number : (850)878-5368

**LLC DISSOLUTION OR WITHDRAWAL
AH4R - FL, LLC**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$25.00 |

RECEIVED

14 DEC 10 AM 10:00

DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 DEC 10 AM 8:08

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DEC 11 2014

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AH4R - FL, 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)

AH4R - FL, LLC

(Firm/Company)

30601 Agoura Road, Suite 200L

(Address)

Agoura Hills, CA 91031

(City/State and Zip Code)

For further information concerning this matter, please call:

Raquel Lopez at (310 774-5435)

(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:

- \$25 Filing 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


AH4R - FL, LLC
(Name of limited liability company)

Delaware
(Jurisdiction of its organization)

February 10, 2012
(Date registered with Florida Department of State)

MI2000000819
(Florida Document Number)

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


(Signature of authorized representative)

Sara Vogt-Lowell
(Typed or printed name of signee)

Filing Fee: \$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Notice of Withdrawal
Of
Certificate of Authority, Cont.

AH4R – FL, LLC
ID# M12000000819
Formed under the laws of: **Delaware**

Effective Date: This application will be effective on December 31st, 2014.

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA