Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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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 ELCO LANDMARK AT WAVERLY PLACE MANAGEMENT,

LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
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DEC - 8 2014

T. HAMPTON

COVER LETTER

	Registratio Division o	n Section f Corporations				
OT IN THE		ELCO LANDMARK AT WAVERLY PLACE MANAGEMENT, LLC				
SUBJEC		(Name of Foreign Limited Liability Company)				
D 6:	or Madam			•		
			1 & . 6tt			
1 us eucio	iseu wiunu	rawal and fee(s) are submitted	n ros sian g .			
Please ret	aum all cor	respondence concerning this	matter to the following:	;		
Terri Mc	Loughlin					
		(Name of Person)				
Landmar	k Residen	tial, LLC		•		
-		(Firm/Company)				
3505 B F	rontage R	oad, Suite 150				
	-	(Address)		,		
Tampe, I	FL 33607	-1703				
		(City/State and Zip Cod	0)	•		
For furthe	er informa	tion concerning this matter, p	lease call;			
	Laughlin	•	813	281-2907 ·		
		Name of Person)	et ()		
	V	Carlo di Parsoni	(1904 0000 00	Dalam resolvana compasi		
:	STREET/COURIER ADDRESS: MAILING ADDRESS:		ING ADDRESS:			
Registration Section		Registration Section				
Division of Corporations		Division of Corporations				
Clifton Building		P.O. Box 6327 Tallahassee, Florida 32314				
2661 Executive Center Circle Tallahassee, Florida 32301		Tation	inico, Florida 32314			
Enclosed	e chec	k for the fellowing amount:				
₩ \$25 F	iling Fee	☐ \$30 Filling Fee &	☐ \$55 Piling Pec &	☐ \$60 Filing Fee,		
	-	Cartificate of Status	Certified Copy	Certificate of Status & Certified Copy		

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

BLCO LANDMAI	rk at waverly place management, llc
	(Name of limited liability company)
Delaware	
	(Jurisdiction of its organization)
02/15/2012	
	(Date registered with Florida Department of State)
M12000000879	
	(Florida Document Number)
This limited liab	pility company is withdrawing its certificate of authority in this state.
_	
	(Signature of authorized representative)
;	Joseph Lubeck
-	(Typed or printed name of signae)

Filing Fee: \$25.00

