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Florida Department of State  
Division of Corporations  
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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
Estimated Charge	\$25.00

RECEIVED

14 DEC -5 AM 10:00

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
REGISTRATION SERVICES

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 DEC -5 AM 9:36

FILED

Electronic Filing Menu Corporate Filing Menu Help

DEC 8 2014

T. HAMPTON

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ELCO LANDMARK AT WAVERLY PLACE MANAGEMENT, 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:

Terri McLaughlin  
(Name of Person)

Landmark Residential, LLC  
(Firm/Company)

3505 B Frontage Road, Suite 150  
(Address)

Tampa, FL 33607-1703  
(City/State and Zip Code)

For further information concerning this matter, please call:

Terri McLaughlin at 813 281-2907  
(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**

BLCO LANDMARK AT WAVERLY PLACE MANAGEMENT, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

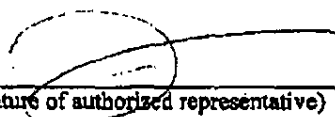
02/15/2012

(Date registered with Florida Department of State)

M1200000879

(Florida Document Number)

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

  
(Signature of authorized representative)

Joseph Luback

(Typed or printed name of signee)

Filing Fee: \$25.00

**FILED**  
14 DEC -5 AM 9:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA