nt of State ision of Corporations

Electronic Filing Cover Sheet

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(((H16000115565 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023

Phone

: (850)205-8842

Fax Number

: (850)878-5368

## LLC DISSOLUTION OR WITHDRAWAL CRP/POLLACK HYDE PARK, L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	03
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MAY 11 2016

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## **COVER LETTER**

TO: Registration Division of	Section Corporations		
SUBJECT: CRP/P	ollack Hyde Park, L.L.C.		
<del></del>	(Name of Fo	reign Limited Liability	Company)
	•		
Dear Sir or Madam:			
The enclosed withdr	awal and fee(s) are submitte	d for filing.	
Please return all corr	espondence concerning this	matter to the followin	g:
Stacy Rosenthal			
	(Name of Person)		-
CRP/Pollack Hyde I	<sup>2</sup> ark, L.L.C.		
	(Firm/Company)		•
1001 Pennsylvania	Ive NW		
	(Address)		-
Washington DC 200	04		
	(City/State and Zip Cod	(c)	_
For further informati	on concerning this matter, p	lease call:	
Stacy Rosenthal		202 at (	729-5 <b>2</b> 51
(N	ame of Person)	(Area Code	& Daytime Telephone Number)
STREET/C	OURIER ADDRESS:	MAI	LING ADDRESS:
Registration		•	stration Section
	Corporations		ion of Corporations
Clifton Buil		P.O.	Box 6327
	tive Center Circle , Florida 32301	Talla	hassee, Florida 32314
Enclosed is a check	for the following amount:		
\$25 Filing Fee	S30 Filing Fee & Certificate of Status	☐ \$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

5/10/2016 9:48:16 AM From: To: 8506176383( 3/3 )

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

(Name of limited liability company)	
Delaware Control of the Control of t	<del>5</del>
(Jurisdiction of its organization)	- <del></del>
05/09/2012	5
(Date registered with Florida Department of State)	AM IO
d12000002575	<b>5</b>
(Florida Document Number)	10
his limited liability company is withdrawing its certificate of authority in this state.	.F
(Signature of authorized representative)	
Stacy M. Rosenthal	

(Typed or printed name of signee)

Filing Fee: \$25.00