## M1200003128

(Req	uestor's Name)				
(Add	ress)				
. (Add	ress)				
- (City.	/State/Zip/Phone	· • #)			
PICK-UP	☐ WAIT	MAIL MAIL			
(Bus	iness Entity Nan	ne)			
(Document Number)					
Certified Copies	Certificates	of Status			
Special Instructions to Filing Officer:					
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WALLS WELL

MAY 2 2 2017

Y SULKER



May 15, 2017

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

RE:

EIN 30-0739263 Karlin Magnolia Place, LLC - Certificate of Cancellation

Dear Sir or Madam:

Enclosed is an executed Notice of Withdrawal of Certificate of Authority for Karlin Magnolia Place, LLC, along with a check in the amount of \$55.00 for the filing and certification fee.

Please file the original Certificate, certify a copy, and return it to me at the address list below:

Karlin Magnolia Place, LLC Attention: Elizabeth Lee 11755 Wilshire Blvd. Suite 1400 Los Angeles, CA 90025

Feel free to let me know if any questions may arise. My phone number is as follows: (310) 806-9733.

Elizabeth Lee

Sincerely

## **COVER LETTER**

		n Section f Corporations						
SUBJECT	ւ. Karli	Karlin Magnolia Place, LLC						
(Name of Foreign Limited Liability Company)					mpany)			
Dear Sir o	r Madam:							
The enclos	sed withd:	rawal and fee(s) are submitte	ed for filing.					
Please retu	ırn all cor	respondence concerning this	matter to the follo	wing:				
Elizabe	th Lee							
		(Name of Person)						
Karlin F	Real Es	tate						
		(Firm/Company)						
11755 \	Vilshire	Blvd. Suite 1400						
	·	(Address)						
Los Ang	geles, C	CA 90025						
		(City/State and Zip Coc	le)					
For further	· informat	ion concerning this matter, p	olease call:					
Elizabe	th Lee		310		806-9733			
	(N	lame of Person)		ode & Da	nytime 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 i	s a check	for the following amount:						
□ \$25 Fili	ng Fee	□ \$30 Filing Fee & Certificate of Status	<b>∠</b> \$55 Filing Fee Certified Copy		☐ \$60 Filing Fee, Certificate of Status & Certified Copy			

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Karlin Magnolia Place, LLC			
(Name of limited liability company)			
Delaware			
(Jurisdiction of its organization)			
June 4, 2012			
(Date registered with Florida Department of State)	3 to		
M12000003128	3	Tax	
(Florida Document Number)	- 35	#J##	
This limited liability company is withdrawing its certificate of authority in thi	s state.	C	
Mathe all		es Son	
(Signature of authorized representative)			
Matthew Schwab			
(Typed or printed name of signee)			

Filing Fee: \$25.00