## (ODD) DOUGOY

(Re	questor's Name)	1
(Ad	dress)	
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(Cit	y/State/Zip/Phon	ne #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	ocument Number	
Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	

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PM 2: 38

2015 NOV -2 PII: 19

HOA 0 3 ggin O.BRUCE CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 876776 76

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: November 2, 2015

ORDER TIME : 1:27 PM

ORDER NO. : 856776-005

CUSTOMER NO: 7628966

## FOREIGN FILINGS

NAME:	HEATHROW	RI	MANAGER	DE	LLC	SECRET (LLAHA	NON 518	-17
CORPORATI	E					385 1384 1384	-2	1-6-J
		)MP	ΔNV			لىد <sup>لىن</sup> .	Ū	11
	dimpidili co	)!·11	LTA T			ORI	=	•
	CORPORAT:	CORPORATE LIMITED PARTNERSHIP	NAME: HEATHROW RI MANAGER DE LLC  CREATHROW R	NAME: HEATHROW RI MANAGER DE LLC  ARE TARY  CORPORATE  LIMITED PARTNERSHIP  LIMITED LIABILITY COMPANY				

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF STATUS

CONTACT PERSON: Kelly Courtney - EXT# 62396

EXAMINER:

ZS 28

## COVER LETTER

	ion Section of Corporations				
He:	athrow RI Manager DE	ELLC			
Sobsper.	(Name of Fo	reign Limited Liability	Company)		
Dear Sir or Madar	n:				
The enclosed with	drawal and fee(s) are submitte	ed for filing.			
Please return all co	orrespondence concerning this	matter to the following	;;		
Felicia Matula	<b>a</b>				
	(Name of Person)		-		
Pinnacle Hote	el Management				
	(Firm/Company)		-		
1480 Royal P	Palm Beach Blvd, Suite	Α			
	(Address)		-	•	
Royal Palm E	Beach, FL 33411				
	(City/State and Zip Coo	le)	•		
For further inform	ation concerning this matter, p	olease call:			
Felicia Matula	э	56,1	242-9066	7A/SE	
	(Name of Person)		Daytime Telephone Num	2015 NOV SEDRED ALLAHA	
Registrat Division Clifton B 2661 Exe	T/COURIER ADDRESS: ion Section of Corporations duilding ecutive Center Circle see, Florida 32301	Regis Divisi P.O. I	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, Florida 32314	-2 PII: 19 ARY OF STATE SSEE, FLORIDA	
Enclosed is a che	ck for the following amount:				
□ \$25 Filing Fee	☐ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	\$60 Filing Fee. Certificate of State Certified Copy	ıs &	

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Heathrow RI Manager DE LLC
(Name of limited liability company)
DELAWARE
(Jurisdiction of its organization)
10/24/2012
(Date registered with Florida Department of State)
m1200006045
(Florida Document Number)
his limited liability company is withdrawing its certificate of authority in this state.
Popul & Francis
(Signature of authorized representative)
Ronald Franklin
(Typed or printed name of signee)  SECRETARY OF S TALLAHASSEE, FL

Filing Fee: \$25.00