M130000 2027

(Re	equestor's Name)			
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(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	WAIT.	MAIL		
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(Document Number)				
Certified Copies	_ Certificates	of Status		
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2015 NOV -4 PH 1:5

NOV 0 5 2015 S. YOUNG CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 856074 4320723

AUTHORIZATION : Soulble

COST LIMIT : \$ 25.00

ORDER DATE: November 1, 2015

ORDER TIME : 1:21 PM

ORDER NO. : 856074-055

CUSTOMER NO: 4320723

FOREIGN FILINGS

NAME: IIT MARINA WEST DC II LLC

CORPORATE
LIMITED PARTNERSHIP

XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF STATUS

CONTACT PERSON: Melissa Zender - EXT#62956

EXAMINER:

COVER LETTER

TO:

Registration Section

Division of	Corporations			
SUBJECT:	larina West DC II LLC	;		
30 5 3801.	(Name of For	eign Limited Liability (Company)	
Dear Sir or Madam:				
The enclosed withdr	rawal and fee(s) are submitte	d for filing.		
Please return all con	respondence concerning this	matter to the following:		
	(Name of Person)			
				SECR.
	(Firm/Company)		•	TILE
	(Address)			N-4 M 9 31
	(City/State and Zip Cod	ic)		
For further informat	ion concerning this matter, p	lease call:		
		. at ()	
(V	Tame of Person)	(Area Code &	Daytime Telephone Number)	•
Registratio Division of Clifton Bui 2661 Exect	f Corporations	Regist Divisio P.O. B	CING ADDRESS: ration Section on of Corporations fox 6327 assee, 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

IIT Marina West DC II LLC			
(Name of limited liability company)			
Delaware			
(Jurisdiction of its organization)			
11/09/2012	152 7	<u>*</u>	
(Date registered with Florida Department of State)	무유		
M12000006296	芸質	2	F
(Florida Document Number)	<u> </u>	-	1
This limited liability company is withdrawing its certificate of authority in this state.	EF FLOR	张 9:	C
Mu. I	D'M	<u> </u>	
John Sienebiling, authorized representative)			
An Authorized Person			
(Typed or printed name of signes)			

Filing Fee: \$25.00