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CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT	NO.	:	120000000195

REFERENCE : 927796 7704756

AUTHORIZATION

COST LIMIT : (/\$\25.00

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ORDER DATE: December 23, 2015

ORDER TIME : 1:01 PM

ORDER NO. : 927796-010

CUSTOMER NO: 7704756

\_\_\_\_\_\_

## FOREIGN FILINGS

NAME: LAKE MARY, 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: Courtney Williams - EXT# 62935

EXAMINER:

## **COVER LETTER**

	gistration vision of	Section . Corporations		
SUBJECT:	Lake	Mary, LLC (Fla. alte	native name: Lak	e Mary Regal Centre LLC)
		(Name of Fo	reign Limited Liability	Company)
Dear Sir or l	Madam:			
The enclose	d withdra	wal and fee(s) are submitte	d for filing,	
Please return	n all corre	spondence concerning this	matter to the following	g.
Corinna I	M. Mar	otta, Esq.	•	
<b></b>		(Name of Person)		•
Rufolo &	Associ	ates, LLC		
·		(Firm/Company)		•
2 Ridged	lale Ave	enue, Suite 250		
		(Address)		
Cedar Kr	nolls, N	J 07927		
		(City/State and Zip Cod	(e)	
For further is	nformatic	n concerning this matter, p	lease call:	
Corinne l	M. Marc	otta	973	397-9600
	(ที่ณ	ne of Person)		Daytime Telephone Number)
Reg Div Clif . 266 Tall	zistration vision of C fton Build 51 Executi lahassee,	Corporations	Registration Section tions Division of Corporations P.O. Box 6327 ter Circle Tallahassee, Florida 32314	
□ \$25 Filing		☐ \$30 Filing Fee & Certificate of Status	2 \$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Lake Mary, LLC (Florida alternative name: Lake Mary Regal Centre LLC)
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
04/09/2013
(Date registered with Florida Department of State)
M13000002239
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
Quime mantage
(Signature of authorized representative)
covinne M. Marotta, Esq.
(Typed or printed name of signee)

Filing Fee: \$25.00

2016 DEC 23 AM 9: 58