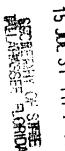
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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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15 JUL 31 PM 1:48

16 JUL 31 PM 1:48

JUL 3 1 2015 T. HAMPTON CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 715160 4320946

AUTHORIZATION : THE BELLE OF THE PARTY OF TH

COST LIMIT : \$ 25.00

ORDER DATE : July 20, 2015

ORDER TIME : 12:35 PM

ORDER NO. : 715160-005

CUSTOMER NO: 4320946

FOREIGN FILINGS

NAME: 400 CORPORATE DRIVE HOLDINGS,

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

Division of Corporations	
400 Corporate Drive Hold	ings, LLC
SUBJECT: (Name of Fo	reign Limited Liability Company)
Dear Sir or Madam:	
The enclosed withdrawal and fee(s) are submitted	d for filing.
Please return all correspondence concerning this	matter to the following:
(Name of Person)	
c/o CSC Corporation Service Comp	any
(Firm/Company)	
1201 Hays Street	
(Address)	
Tallahassee, FL 32301	
(City/State and Zip Co	de)
For further information concerning this matter, p	please call:
	at ()
(Name of Person)	at ()(Area Code & Daytime 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 is a check for the following amount	:
2 \$25 Filing Fee \$25 Certificate of Status	Certified Copy Certified Copy Certified Copy Certified Copy
	2

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

400 Corporate Drive Holdings, LLC

Maryland (Jurisdiction of its organization)		_
07/18/2013		
(Date registered with Florida Department of State)		_
M1300004543		
(Florida Document Number)		_
This limited liability company is withdrawing its certificate of authority in this state.		
(Signature of authorized representative) Libby Krueger (Typed or printed name of signee)	SECRETARY OF STREET	15 JUL 31 PM 4: 47