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Division of Corporations

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From:

Account Name : ELJAIEK, RUIZ, RODRIGUIZ, ALVEREZ, PLLC DBA ERRA LAW

Account Number: 120030000013 Phone : (305)444-5969

Fax Number : (786)532-9173

LLC DISSOLUTION OR WITHDRAWAL® REFLECTIONS PROPERTY HOLDINGS, LLC

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	EFLECTIONS PROPERTY HO	LDINGS, LLC	
SUBJECT: _	(Name of Fo	reign Limited Liability	Company)
Dear Sir or Mac	iam:		
The enclosed w	ithdrawal and fee(s) are subscritt	of for filing.	
Please return all	correspondence concerning this	s matter to the followin	g:
Monique Marti	по		
	(Nume of Person)		-
ERRA Law			
	(Firm/Company)		_
2601 S Baysho	re Drive 18th Floor		
	(Address)		_
Coconut Grove	, FL 33133		
	(City/State and Zip Cod	de)	_
For lixthes info	rmation concerning this matter,	please call:	
Monique Marti	no	786 at (586-9243
<u> </u>	(Name of Person)		2 Daytime Telephone Number)
Regis Divisi P.O. I	g Address: tration Section ion of Corporations Box 6327 nassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a cl	neck for the following amount:		
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NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

REFLECTIONS PROPERTY HOLDINGS, LLC
(Name of limited liability company)
Delaware
(Autschreien of its organization)
12-12-2013
(Date registered with Florida Department of State)
M13000007857
(Finis Decument Number)
This limited liability company is withdrawing its certificate of authority in this state;
Effective Date, if other than the date of filing:
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
A MED SI
(Signature of authorized representative) Alyssa Ruiz Esq
(Typed or printed name of signee)

Filing Fee: \$25.00

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