

M14000000308

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

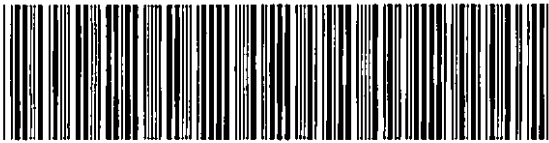
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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RECEIVED  
DEPARTMENT OF STATE  
18 JAN 19 PM 2:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED  
18 JAN 19 AM 8:10  
TALLAHASSEE, FLORIDA

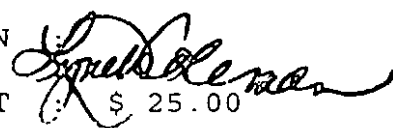
CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 032574 7557294

AUTHORIZATION

COST LIMIT \$ 25.00



ORDER DATE : January 19, 2018

ORDER TIME : 12:43 PM

ORDER NO. : 032574-010

CUSTOMER NO: 7557294

FOREIGN FILINGS

NAME: BISCAYNE 1900 OWNER LLC

☐ CORPORATE  
☐ LIMITED PARTNERSHIP  
☒ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY  
☒ PLAIN STAMPED COPY  
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Roxanne Turner - EXT#

EXAMINER: \_\_\_\_\_

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BISCAYNE 1900 OWNER LLC

(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher W. Flynn

(Name of Person)

Atlas Capital Group

(Firm/Company)

450 Park Avenue 4th FL

(Address)

New York, NY 10022

(City/State and Zip Code)

For further information concerning this matter, please call:

David Abramowitz

212

554-2250

at ( )

(Name of Person)

(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:

☐ \$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

BISCAYNE 1900 OWNER LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

January 16 2016

(Date registered with Florida Department of State)

M14000000308

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

Effective Date, if other than the date of filing: 1/19/18 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after 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.



(Signature of authorized representative)

Andrew B. Cohen

(Typed or printed name of signee)

**Filing Fee: \$25.00**

FILED  
18 JAN 19 AM 8:40  
CLERK OF THE COURT  
JAN 19 2018