

m14000000876

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

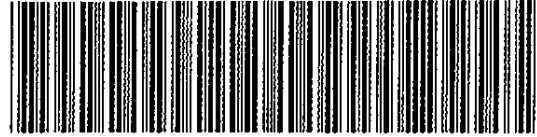
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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FILED

2016 APR 14 A 8:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
DEPARTMENT OF STATE  
16 APR 14 AM 11:24

APR 15 2016

S MASON

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

ACCOUNT NO. : I20000000195

REFERENCE : 102385 4361510

AUTHORIZATION :

COST LIMIT : \$25.00

ORDER DATE : April 13, 2016

ORDER TIME : 10:08 AM

ORDER NO. : 102385-025

CUSTOMER NO: 4361510

FOREIGN FILINGS

NAME: METRO FL-MULTIFAMILY, 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: Melissa Zender - EXT# 62956

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

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Metro FL-Multifamily, 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:

Linda Bodenstein

(Name of Person)

Colony Capital, Inc.

(Firm/Company)

515 S. Flower Street, 44th Floor

(Address)

Los Angeles, CA 90071

(City/State and Zip Code)

For further information concerning this matter, please call:

Linda Bodenstein at 310 282-8820  
(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:

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|--|---|--|--|

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Metro FL-Multifamily, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

2/7/2014

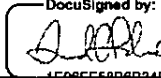
(Date registered with Florida Department of State)

M14000000876

(Florida Document Number)

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

DocuSigned by:



1E06FE58B0B34B1...

(Signature of authorized representative)

David A. Palamé

(Typed or printed name of signee)

Filing Fee: \$25.00

**FILED**  
2016 APR 14 A 8:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA