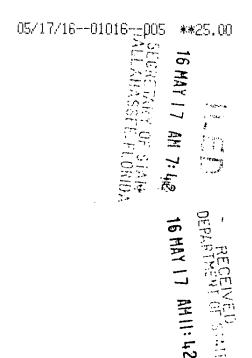
## M14 000001014

(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Dusiness Littly Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Special Instructions to Filing Officer:				

Office Use Only



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## ĊT

May 17, 2016

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re:

Order #: 10012293 SO

Customer Reference 1:

201600122

Customer Reference 2:

Richland withdrawals

Dear Department of State, Florida:

Please obtain the following:

Richland Towers - Knoxville, LLC (DE) Cancellation Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092.

Thank you very much for your help.

Sincerely,

Connie R Bryan Senior Fulfillment Specialist Connie.Bryan@wolterskluwer.com

## **COVER LETTER**

Division of	f Corporations				
SUBJECT:	Richlan	d Towers-Knoxville, LI	.c		
(Name of Foreign Limited Liability Company)					
Dear Sir or Madam:					
The enclosed withdr	awal and fee(s) are submitte	ed for filing.			
Please return all con	respondence concerning this	matter to the following	<b>;</b>		
Kathleen A. Quinn					
·	(Name of Person)		-		
c/o American Towe	r Corporation				
	(Firm/Company)		-		
116 Huntington Ave	enue				
	(Address)		-		
Boston, MA:02116			•		
	(City/State and Zip Cod	le)	-		
För further informati	on concerning this matter, p	lease call:			
Kathleen A. Quinn		617 at (	375-7500		
(N	ame of Person)		Daytime Telephone Number)		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 3230;		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check	for the following amount:				
□ \$25 Filling Pee	□ \$30 Filing Fee & Certificate of Status	Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy		

TO:

Registration Section

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

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Filing Fee: \$25.00