M14000001974

(Re	questor's Name)	
(1/2	questor s (varne)	
	dress)	
(Au	uiess)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	_ Certificates of	f Status
Special Instructions to	Filing Officer	
opcolar managements to	, ming conser.	

Office Use Only



700328154777







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

__ CORPORATE

ACCOUNT NO. : I200000000195

REFERENCE : 744641 4361510

AUTHORIZATION : Julian Service Servic

EXAMINER: ____

LIMITED PARTNERSHIP

XX 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#

COVER LETTER

_	ision of (Corporations		
SUBJECT:	CRE 20	11 REO FL-Church, LLC		
SUBJECT:		(Name of Fo	reign Limited Liability	Company)
Dear Sir or N	dadam:			
The enclosed	l withdra	wal and fee(s) are submitte	ed for filing.	
Please return	all corre	spondence concerning this	matter to the following	:
Director of L	Legal			
		(Name of Person)		-
Colony Capi	ital, Inc.			
		(Firm/Company)		-
515 S. Flowe	er Street.	44th Floor		
		(Address)		•
Los Angeles	. CA 900	71		
·· = ·-	_	(City/State and Zip Coo	le)	•
For further in	ıformatio	n concerning this matter, p	lease call:	
			-4.6	,
	(Nar	ne of Person)	at (at (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 fo	or the following amount:		
□ \$25 Filing	Fee	☐ \$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

CRE 2011 REO	FL-Church, LLC	
	(Name of limited liability company)	<u> </u>
Delaware		到馬里
	(Jurisdiction of its organization)	
March 24, 2014		量
	(Date registered with Florida Department of State)	271
M14000001974		夏帝 三
	(Florida Document Number)	
(If an effective more than 90 a Note: If the da	e, if other than the date of filing: e date is listed, the date must be specific and cannot be prior to date days after filing.) ate inserted in this block does not meet the applicable statutory files to be listed as the document's effective date on the Department of the departme	ling requirements.
	Carol Mayers 34038A18E2E3434 (Signature of authorized representative)	
	Carol Mayers (Typed or printed name of signee)	
	(ryped or printed name of signee)	

Filing Fee: \$25.00