5/29/2020

Division of Corporations

## H20000161506 3 Department of

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(((H200001615063)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-0821 : (850)558-1515 Fax Number

LLC DISSOLUTION OR WITHDRAWAL COMMANDER HARMONY HOUSING LLC

Certificate of Status	0
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## **COVER LETTER**

	gistration vision of (	Section Corporations		·		
entoneerr		ander Harmony Housing L	LC_			
(Name of Foreign Limited Liability Company)						
Dear Sir or	Madam:					
The enclose	ed withdra	wal and fee(s) are submitted	l for filing.			
Please retur	n all corre	spondence concerning this i	matter to the following	g:		
Robert Ba	rolak					
		(Name of Person)		_		
Command	ier Harmo	ony Housing LLC		_		
	<del></del> -	(Firm/Company)				
152 West	57th Stre	eet, 60th Floor				
		(Address)		-		
New York	, NY 100	19				
		(City/State and Zip Code	:)	_		
For further	informati	on concerning this matter, p	lease call:			
Andrea S	ollus		212 at (	649-9735		
	(Na	ame of Person)	(Area Code &	& Daytime Telephone Number)		
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Enclosed i	is a check	for the following amount:				
□\$25 Fil	ing Fee	☐ \$30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy		

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## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Commander Harmony Housing LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
5/23/2014
(Date registered with Florida Department of State)
M1400003551
(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:  (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)
Robert Barolak - President
(Typed or printed name of signee)

Filing Fee: \$25.00