

M/4000005428

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

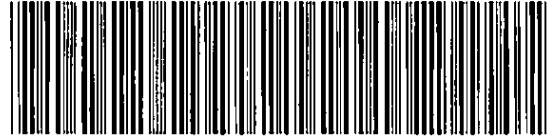
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



600301809096

FILED

2017 JUL 27 AM 8:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2017 JUL 27 AM 10:50

FILED  
TALLAHASSEE, FLORIDA

K. SALY

JUL 28 2017

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

ACCOUNT NO. : I20000000195

REFERENCE : 742393 7955045

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : July 26, 2017

ORDER TIME : 5:21 PM

ORDER NO. : 742393-010

CUSTOMER NO: 7955045

FOREIGN FILINGS

NAME: CROWN MIAMI HOTEL HOLDING  
COMPANY, LLC

       CORPORATE  
       LIMITED PARTNERSHIP  
XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF STATUS

CONTACT PERSON: Roxanne Turner - EXT#

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

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Crown Miami Holding Company, 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:

Omar Palacios

(Name of Person)

Geolo Capital

(Firm/Company)

Pier 5 The Embarcadero Suite 102

(Address)

San Francisco, CA 94111

(City/State and Zip Code)

For further information concerning this matter, please call:

John Greene

415

694-5823

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

Crown Miami Hotel Holding Company, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

July 30, 2014

(Date registered with Florida Department of State)

M14000005428

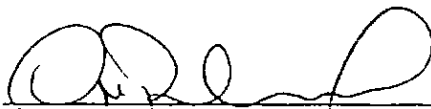
(Florida Document Number)

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

Effective Date, if other than the date of filing: 7/25/2017 (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)

Omar Palacios

(Typed or printed name of signee)

Filing Fee: \$25.00

FILED  
2017 JUL 27 AM 8:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA