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D SCOTT JUN 27 2019 CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

___ CERTIFIED COPY
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CERTIFICATE OF STATUS

CONTACT PERSON: Lydia Cohen - EXT# 62974

Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 7882647 822187 AUTHORIZATION (COST LIMIT ORDER DATE: June 26, 2019 ORDER TIME : 9:07 AM ORDER NO. : 822187-010 CUSTOMER NO: 7882647 FOREIGN FILINGS NAME: 201 NORTH FRANKLIN TAMPA, LLC CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY XXXX WITHDRAWAL/CANCELLATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

EXAMINER:

COVER LETTER

	stration Section sion of Corporations				
SUBJECT:	201 North Franklin Tampa, LLC				
obbucci.	(Name of Fo	reign Limited Liability	Company)		
Dear Sir or M	adam:				
The enclosed	withdrawal and fee(s) are submitte	ed for filing.			
Please return	all correspondence concerning this	matter to the following	μ		
Frank Zazzer	a			17.1	233
	(Name of Person)		-		1599 JUN 26
Alliance Man	agement HSP, LLC			3555	2ь
	(Firm/Company)		•	17.00	Σ. Σ
40 Morris Av	re, Ste 230			113 F	8
	(Address)				
Bryn Mawr, I	PA 19010		•		
	(City/State and Zip Coo	ie)	-		
For further inf	ormation concerning this matter, p	blease call:			
Frank Zazzer	a	484	362-2698		
	(Name of Person)	at ((Area Code &	Daytime Telephone Number)	· · · ·	
Regis Divis Clifto 2661	EET/COURIER ADDRESS: stration Section ion of Corporations on Building Executive Center Circle hassee, 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 I	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

201 North Frank	lin Tampa, LLC		
	(Name of limited liability company)		_
Delaware		7 2	
	(Jurisdiction of its organization)	هنه ر س	7
9/29/14		AHA	=
	(Date registered with Florida Department of State)	نيز م	_ :
M14000007016		~~~ >	,
	(Florida Document Number)	0210 6	_
This limited li	ability company is withdrawing its certificate of authority in this	·	1
Effective Date	, if other than the date of filing:	(optional)	
(If an effective	date is listed, the date must be specific and cannot be prior to datays after filing.)	ite of filing or	
Note: If the da	te inserted in this block does not meet the applicable statutory file to be listed as the document's effective date on the Department of		
	Callette m		
	(Signature of authorized representative)		
	Clay Hamlin III		
	(Typed or printed name of signee)		

Filing Fee: \$25.00