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COVER LETTER

TO:

Registration Section Division of Corporations

CRT	BAYMEADOWS OW	NER LI	_C		
SUBJECT:	(Name of Fo	reign Limi	ted Liability	Company)	
Dear Sir or Madam:					
The enclosed withdr	rawal and fee(s) are submitte	d for filing	g.		
Please return all cor	respondence concerning this	matter to	the following	:	
Indira Negron					
	(Name of Person)			-	
C/O DRA Advi	sors LLC				
	(Firm/Company)			-	
220 East 42nd	Street, 27th Floor				
	(Address)		. .	-	
New York, NY	10017				<u> </u>
	(City/State and Zip Coc	le)		•	
For further informat	tion concerning this matter, p	lease call:			2 (2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
Indira Negron			212	697-4740	100 C
(5	Same of Person)	at (Daytime Telephone Number)	98,8716) 12: 25
Registratio Division o Clifton Bu 2661 Exec	f Corporations		Regist Divisi P.O. 1	ANG ADDRESS: tration Section on of Corporations Box 6327 hassee, Florida 32314	៊ី
Enclosed is a check	k for the following amount:				
■ \$25 Filing Fee	☐ \$30 Filing Fee & Certificate of Status		filing Fee & fied Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Conv	

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

CRT BAYMEADOWS OWNER LLC	
(Name of limited liability company)	
Delaware	
(Jurisdiction of its organization)	
10/09/2014	
(Date registered with Florida Department of State)	
M1400007316	
(Florida Document Number)	
This limited liability company is withdrawing its certificate of authority in this state.	
Signature of authorized representative) Sason Boccoo (Typed or printed name of signee)	SECRETARY OF STATE SHORETARY OF STATE SHORETARY CONFORMATIONS 18 JUN 18 FM 12: 25

Filing Fee: \$25.00