115000002119

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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DEC 28 2015

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

ACCOUNT NO. : I2000000195

REFERENCE : 928539 5168766

AUTHORIZATION : World By

COST LIMIT : \$/25.00

ORDER DATE: December 23, 2015

ORDER TIME : 3:24 PM

ORDER NO. : 928539-025

CUSTOMER NO: 5168766

FOREIGN FILINGS

NAME: ATLANTIC RIDGE NH LLC

____ CORPORATE

LIMITED PARTNERSHIP

XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF STATUS

CONTACT PERSON: Courtney Williams - EXT# 62935

EXAMINER:

COVER LETTER

	ion Section of Corporations		
Atla	intic Ridge NH LLC		
	(Name of For	reign Limited Liability	Company)
Dear Sir or Madar	n:		
The enclosed with	drawal and fee(s) are submitte	d for filing.	
Please return all co	orrespondence concerning this	matter to the following	:
Lisa Schwartz	2		
	(Name of Person)		_
Greystone &	Co., Inc.		
	(Firm/Company)		-
152 West 57tl	n Street, 60th Floor		
	(Address)		-
New York, NY	′ 10019		
	(City/State and Zip Cod	e)	-
For further inform	ation concerning this matter, p	lease call:	
Andrea Saullo		212 at (649-9700
((Name of Person)		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 che	ck 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

Atlantic Ridge NH LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
March 23, 2015
(Date registered with Florida Department of State)
My15000002119
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
Signature of authorized representative) Lisa Schwartz - Secretary
(Typed or printed name of signee)

Filing Fee: \$25.00