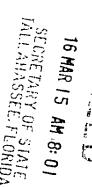
## M1500000 7598

(Re	questor's Name)		
(1.0	, , , , , , , , , , , , , , , , , , , ,		
(Ad	dress)		
<b>V</b>	,		
(Address)			
(, , ,	u, 500,		
(Cit	y/State/Zip/Phone #	<del> </del>	
(Oil	yrotaterziph hone #	•	
PICK-UP	MAIT	MAIL	
(Bu	siness Entity Name)		
(Document Number)			
Certified Copies	_ Certificates of	Status	
Special Instructions to Filing Officer:			
'	J		

Office Use Only



800283094198



RECEIVED
RECEIVED
16 MAR 15 PM 12: 06

MAR 1 6 2016 J SHIVERS CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

1 6 7

ACCOUNT NO. : 12000000195

REFERENCE : 061262 4307171

AUTHORIZATION :

COST LIMIT : 75 25.00

ORDER DATE: March 15, 2016

ORDER TIME : 9:20 AM

ORDER NO. : 061262-005

CUSTOMER NO: 4307171

## FOREIGN FILINGS

NAME: 4145 BOUGAINVILLA MANAGER 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**

	ation Section of Corporations		
SUBJECT: 4 <sup>2</sup>	45 Bougainvilla Manage	er LLC	
	(Name of For	eign Limited Liability	Company)
Dear Sir or Mad	am:		
The enclosed wi	thdrawal and fee(s) are submitte	d for filing.	
Please return all	correspondence concerning this	matter to the following	:
Alison M. la	nnotti, Esq.		
	(Name of Person)		-
Rogin Nass	au LLC		
	(Firm/Company)		-
185 Asylum	Street, 22nd Floor		
	(Address)		-
Hartford, CT	06103		
	(City/State and Zip Cod	e)	-
For further infor	mation concerning this matter, p	lease call:	
Alison M. la	notti, Esq.	860	256-6300
	(Name of Person)		Daytime Telephone Number)
	TT/COURIER ADDRESS:		LING ADDRESS: tration Section
Divisio	n of Corporations	Division of Corporations	
	Building recutive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314	
	ssee, Florida 32301	1 41141	lassee, Florida 32314
Enclosed is a cl	eck for the following amount:		
<b>2</b> \$25 Filing Fe	e \$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

4145 Bougainvilla Manager LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
May 8, 2015
(Date registered with Florida Department of State)
M15000003598
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
(Signature of authorized representative)
(Signature of authorized representative)
Hagan Brown
(Typed or printed name of signee)

Filing Fee: \$25.00