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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023

Phone : (512)418-6949
Fax Number : (954)208-0845

LLC DISSOLUTION OR WITHDRAWAL GCAM VHC LLC

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D. SCOTT MAY 1 8 2017

COVER LETTER

Division o	n Section f Corporations	14	· ·	
GCAT	M VHC LLC			
SUBJECT:	(Name of Fo	reign Limited Liabilit	(Company)	
Dear Sir or Madam		,		
The enclosed withd	rawal and fee(s) are submitte	ed for filing.		
Please return all cor	respondence concerning this	matter to the following	ng:	
John Lane				
11 - 17 - 17 - 17 - 17 - 17 - 17 - 17 -	(Name of Person)	<u></u>	_	
GCAM Legacy LL	c			
	(Firm/Company)			
650 Newport Cente	r Drive			
	(Address)		-	
Newport Beach, CA	N 92660	T j	•	
	(City/State and Zip Coc	le)	_	المنسية الدرائسية
For further informat	ion concerning this matter, p	olease call:		温まれ
John Lane		949 at (720-6000	N TO MED
(1)	lame of Person)		& Daytime Telephone Number)	FIG. E
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Regi Divi P.O.	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	S55 Filing Fee & Certified Copy	S60 Filing Fee, Certificate of Status & Certified Copy	

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

	LC		
			(Name of limited liability company)
Delaware			
			(Jurisdiction of its organization)
November 6, 20	Ú15		
	·	(Date r	egistered with Florida Department of State)
M15000008967	7		
			(Florida Document Number)
This littled	iadinty co	трапу н	s withdrawing its certificate of authority in this state.
		(1	Signature of authorized representative)
	John Lan	e	
	*	***	(Typed or printed name of signee)

Filing Fee: \$25.00