

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023

Phone : (850) 205-8842 Fax Number : (850) 878-5368

## LLC DISSOLUTION OR WITHDRAWAL MM82.7 ISLAMORADA OWNER, L.L.C.

Certificate of Status	0
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## COVER LETTER

TO: Registration Division of	Section Corporations		
SUBJECT: MM82.	7 Islamorada Owner, L.L.C (Name of For	reign Limited Liability	Сотрапу)
Dear Sir or Madam:			
The enclosed withdra	wal and fee(s) are submitte	d for filing.	
Please return all corre	espondence concerning this	matter to the following	g:
Stacy M. Rosenthal			
	(Name of Person)	-	_
MM82.7 Islamorada	Owner, L.L.C.		_
	(Firm/Company)		
1001 Pennsylvania A	ve NW		_
	(Address)		_
Washington DC 200	04		
	(City/State and Zip Cod	ਖ)	_
For further information	on concerning this matter, p	lease call:	
Stacy M Rosenthal		202 at (	729-5251
(Na	me of Person)		& Daytime Telephone Number)
Registration Division of C Clifton Build 2661 Execut Tallahassee,	Corporations ling ive Center Circle Florida 32301	Regis Divis P.O. Talla	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, Florida 32314
Enclosed is a check f	or the following amount:  \$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

MM82.7 Islamorada Owner, L.L.C.	
(Name of limited liability company)	
Delaware	
(Jurisdiction of its organization)	_
05/05/2016	
(Date registered with Florida Department of State)	_
M16000003633	
(Florida Document Number)	_
This limited liability company is withdrawing its certificate of authority in this state.	
(Signature of authorized representative) Stacy M. Rosenthal	
(Typed or printed name of signce)	
THE STATE OF	!  つ

Filing Fee: S25.00