Division of Corporations Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FLAGLER DEVELOPMENT GROUP, LLC

Account Number : I20020000144

Phone : (305) 520-2344

Fax Number

: (305)520-2400

LLC DISSOLUTION OR WITHDRAWAL 3MC OFFICE LLC

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COVER LETTER

TO:	Registratio Division of	n Section f Corporations	<u>:</u>		
SUBJE		Office LLC			
501501		(Name of For	reign Limited Liabilit	y Company)	
Dear Si	ir or Madam:				
The end	closed withdi	rawal and fee(s) are submitte	d for filing.	,	
Please	return all cor	respondence concerning this	matter to the following	ng:	
Attn:	Legal De _l	partment			
		(Name of Person)		_	
		(Firm/Company)	······································	_	
2855	Le Jeune	Rd., 4th Floor	i.		
		(Address)	· · · · · · · · · · · · · · · · · ·		
Coral	Gables, l	FL 33134			
		(City/State and Zip Cod	e)		
For furt	ther informat	ion concerning this matter, p	lease call:		
Jessi	ca Perez		305	520-2366	
	(N	ame 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			
Enclose	ed is a check	for the following amount:	her.		
22 \$ 25 1	Filing Fee	☐ \$30 Filing Fee & Certificate of Status	S55 Fiting Fee & Certified Copy.	Contificate of Status & Certificate Copy	

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

555 39 e.g.

3MC Office LL0	C .
	(Name of limited liability company)
Delaware	
	(Jurisdiction of its organization)
6/8/2016	•
	(Date registered with Florida Department of State)
M16000004638	3
	(Florida Document Number)
This limited liabi	lity company is withdrawing its certificate of authority in this state.
	(Signature of Juthorized representative)
	V
K	olleen Cobb, Vice President
	(Typed or printed name of signee)
	$(x,y,y)\in \mathcal{A}_{x}\cap \mathcal{B}_{x}$

Filing Fee: \$25.00

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SECRETARY OF STATE OWISION OF COMPORATIONS
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