Morita Department of State Division of Corporation State Consider Siling Cover Sheet

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To:

Division of Corporations

Fax Number : (

: (850)617-6383

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From:

Account Name : FLAGLER DEVELOPMENT GROUP,

Account Number : I20020000144
Phone : (305)520-2344
Fax Number : (305)520-2400

LLC DISSOLUTION OR WITHDRAWAL PARCEL 10A/10B LLC

Certificate of Status (1)	11:5	· 0
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Corporate Filing Menu

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J. HARRIS

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4	C	OVER LETTE	R	
TO: Registration Division of	Section Corporations	\$4.		
Parce	el 10A/10B LLC	-		
SUBJECT:		reign Limited Liability	y Company)	
		kape "		
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	ığ:	
Attack and Den	art-mant			
Attn: Legal Dep	(Name of Person)			
	(Name of Ferson)			
		i ŝ	_	
	(Firm/Company)		<u> </u>	
		". ይ ቀ.		
2855 Le Jeune	Rd., 4th Floor		_	
	(Address)		,	
Coral Gables, F	L 33134			
	(City/State and Zip Cod	e) ,::		
For further information	on concerning this matter, p	lease call:		•
Jessica Perez		305	520-2366	
(Na	me of Person)		& Daytime Telephone Number)	
Registration Division of C Clifton Build 2661 Execut	Corporations	Regi Divi P.O.	ILING ADDRESS: stration Section sion of Corporations Box 6327 thassee, Florida 32314	
Enclosed is a check i	for the following amount:	. 1971 t	-	1
2 \$25 Filing Fee	☐ \$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy	

NOTICE OF WITHDRAWAL OF CERFIFICATE OF AUTHORITY

	 V		
Parcel 10A/1	OB LLC		
	(Name of limited liability company)		
Delaware			
	(Jurisdiction of its orga: ization)		
10/27/2016			
	(Date registered with Florida Department of State)		
M160000085	43		
	(Florida Document Number)		
This limited lis	ability company is withdrawing its certificate of authority in this sta	ate.	
	APCOBL	unio del	
	(Signature of authorized representative)		
	Kolleen Cobb, Vice President		25-
	(Typed or printed name of signee)	NSSEE FL	WILL LANGE

Filing Fee: \$25.00

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