

(F	Requestor's Name)	_		
(<i>F</i>	Address)	_		
	Address)	_		
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PICK-UP	WAIT MAIL			
(E	Business Entity Name)	_		
(Document Number)				
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COVER LETTER

Registration Section

TO:

Division of	Corporations		
Duke SUBJECT:	Realty Turnpike Cro	ssing Building	5, LLC
	(Name of For	cign Limited Liabil	ity Company)
Dear Sir or Madam:			
The enclosed withdr	awal and fee(s) are submitted	d for filing.	
Please return all corr	respondence concerning this	matter to the follow	ving:
Sue Larson			
	(Name of Person)	·	
Duke Realty Co	orporation		
	(Firm/Company)		
3715 Davinci C	Court, Suite 300		
	(Address)		
Peachtree Corr	ners, GA 30092		
	(City/State and Zip Cod	e)	
For further informat	ion concerning this matter, p	lease call:	
Sue Larson		770 at (638-2633
18	ame of Person)		de & 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	
Enclosed is a check	for the following amount:		
☑ \$25 Filing Fee	☐ \$30 Filing Fee & Certificate of Status	S55 Filing Fee Certified Copy	

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Duke Realty Turnpike Crossing Building 5, LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
01/23/2018
(Date registered with Florida Department of State)
M1800000770
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
(Signature of authorized representative)
Tammi D. Parker
(Typed or printed name of signee)

Filing Fee: \$25.00