

MA9000001712

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

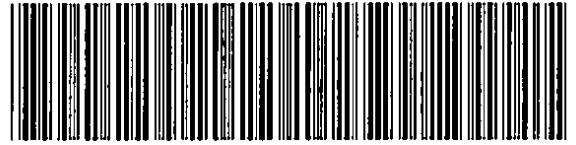
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer.

Office Use Only



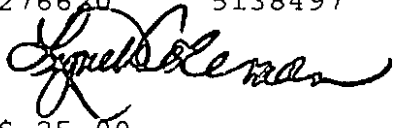
800315036778

FILED  
2018 JUN 27 AM 8:01  
TALLAHASSEE, FLORIDA

18 JUN 27 AM 11:01  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

JUN 28 2018  
J. HARRIS

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 276620 5138497  
AUTHORIZATION :   
COST LIMIT : \$ 25.00

ORDER DATE : June 26, 2018  
ORDER TIME : 9:12 AM  
ORDER NO. : 276620-025  
CUSTOMER NO: 5138497

FOREIGN FILINGS

NAME: VRS DORAL LLC

\_\_\_\_ CORPORATE  
\_\_\_\_ LIMITED PARTNERSHIP  
XX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF STATUS

CONTACT PERSON: Roxanne Turner - EXT#

EXAMINER: \_\_\_\_\_

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: VRS Doral LLC  
\_\_\_\_\_  
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jennifer Symmis  
\_\_\_\_\_  
(Name of Person)

TA Realty LLC  
\_\_\_\_\_  
(Firm/Company)

28 State Street, 10th Floor  
\_\_\_\_\_  
(Address)

Boston, MA 02109  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Jennifer Symmis                      617                      476-2797  
\_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
(Name of Person)                      (Area Code & 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:

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|--|---|--|--|

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

VRS Doral LLC

(Name of limited liability company)

VA

(Jurisdiction of its organization)

10/28/1999

(Date registered with Florida Department of State)

M99000001712

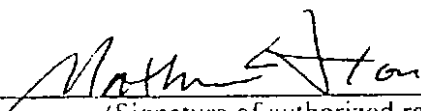
(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

Effective Date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

  
(Signature of authorized representative)

Nathan L. Foss

(Typed or printed name of signee)

FILED  
2018 JUN 27 AM 8:01  
TALLAHASSEE  
FLORIDA

Filing Fee: \$25.00