m99000001909

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

COVER LETTER

TO: Registratio	n Section f Corporations		·
SUBJECT: RPH I	HOTEL ASSOCIATES, LLC	#M99000	001909
	(Name of Foreign	Limited Liability	y Company)
Dear Sir or Madam:			
The enclosed withd	rawal and fee(s) are submitted fo	r filing.	
Please return all cor	respondence concerning this mat	ter to the following	ng:
Sue Henderson			_
	(Name of Person)		
Starwood Hotels &	Resorts Worldwide, Inc.		•
	(Firm/Company)	•	_
2231 E. Camelback	Road, Suite 400		
	(Address)	.	
Phoenix, AZ 85016	j		
· · · · · · · · · · · · · · · · · · ·	(City/State and Zip Code)	1 101 1	The second secon
•	•		
For further informat	tion concerning this matter, pleas	e call:	
Sue Henderson - Ta	x Department	at (602	
(N	lame of Person)	(Area Code	& Daytime Telephone Number)
Registratio Division of Clifton Bu 2661 Exec	f Corporations	Regi Divi P.O.	ILING ADDRESS: istration Section sion of Corporations Box 6327 ahassee, Florida 32314
Enclosed is a check	k for the following amount:		
\$25 Filing Fee	Certificate of Status	\$55 Filing Fee & Certified Copy	Certificate of Status &
Paceur, =2, 8981			Certified Copy
	Ç. 600.		

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

RPH HOTEL ASSOCIATES, LLC #M99000001909
(Name of limited liability company)
DELAWARE
(Jurisdiction of its organization)
This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.
This limited liability company revokes the authority of its registered agent to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business in Florida.
2231 E. Camelback Road, Suite 400
(Mailing address)
Phoenix, AZ 85016
(City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
(Signature of member or authorized representative of a member)
Peter Morrow
(Typed or printed name of signee)

Filing Fee: \$25.00