## M06000001424

(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:					





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LLABASSEE, FLORIDA

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19 FEB 28 AM 10: 38

WARD I 2019

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

	ACCOUNT NO.	: I20000	0000195	
•	REFERENCE	: 648844	4336482	
	AUTHORIZATION	: Squell	eleman.	
	COST LIMIT	: \$ 2.5%	00	
ORDER DATE :	February 27, 201	9		
ORDER TIME :	5:29 PM			
ORDER NO. :	648844-010			
CUSTOMER NO:	4336482			
				. <b></b>
	FOREIGN F	ILINGS		
NAME:	CABOT EAST BR	OWARD 24 I	ıLC	
CORPORA	TE			

LIMITED PARTNERSHIP

XXX 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: Emily Croft - EXT# 62925

EXAMINER:

## **COVER LETTER**

		on Section f Corporations					
SUBJECT:		East Broward 24 LLC					
000011011	(Name of Foreign Limited Liability Company)						
Dear Sir or	Madam	:					
The enclose	d withd	rawal and fce(s) are submitte	ed for filing.				
Please return	n all cor	respondence concerning this	s matter to the following	:			
June Diama	nt						
	_	(Name of Person)	·				
Law Office:	s of Jun	c Diamant					
		(Firm/Company)					
229 Linwoo	d Aven	uc					
		(Address)					
Cedarhurst,	New Y	ork 11516					
		(City/State and Zip Coo	de)				
For further is	nformat	ion concerning this matter, p	olease cail:				
June Diama:	nt		516 at (	569-0284			
	(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					
Enclosed is	a check	for the following amount:					
⊒ \$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 CERTIFICATE OF AUTHORITY

CABOT EAST BRO	WARD 24 LLC	
<del></del>	(Name of limited liability company)	
DELAWARE		
	(Jurisdiction of its organization)	n
3/09/2006		j
	(Date registered with Florida Department of State)	
M06000001424		
	(Florida Document Number)	
Effective Date, if a (If an effective date) more than 90 days Note: If the date in	other than the date of filing:	
	(Signature of authorized representative)	
Lin	la Greenfield	
	(Typed or printed name of signee)	

Filing Fee: \$25.00