

M120000001065

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

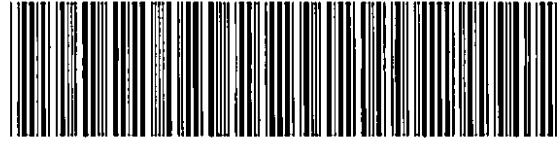
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2019 MAR -4 AM 9: 54
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TALLAHASSEE, FLORIDA

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19 MAR -4 PM 2: 10
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS
SECRETARY OF STATE

T.S.
2/25/19

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

ACCOUNT NO. : I20000000195
REFERENCE : 652565 7232457
AUTHORIZATION : *[Signature]*
COST LIMIT : \$25,000

ORDER DATE : March 1, 2019
ORDER TIME : 12:48 PM
ORDER NO. : 652565-005
CUSTOMER NO: 7232457

FOREIGN FILINGS

NAME: KNOFF MOTORSPORTS, LLC

CORPORATE
 LIMITED PARTNERSHIP
 LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF STATUS

CONTACT PERSON: Roxanne Turner - EXT#

EXAMINER: _____

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TALLAHASSEE, FL 09111

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

KNOPF MOTORSPORTS, LLC

(Name of limited liability company)

DELAWARE

(Jurisdiction of its organization)

2/24/12

(Date registered with Florida Department of State)

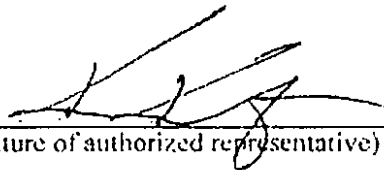
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(Florida Document Number)

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)

KRISTOFER KNOPF

(Typed or printed name of signee)

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Filing Fee: \$25.00