## M150000000787

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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2016 APR -8 P 3: 1u

BRUCE

## **COVER LETTER**

	tration Section of Cor							
	12861 G	iHL, LLC						
SUBJECT: _		(Name of For	eign Limi	ted Liability (	Company)	<del></del> .		
Dear Sir or Ma	adam:							
The enclosed v	withdrawa	and fee(s) are submitted	d for filin	<u>.</u>				
Please return a	ill correspo	ondence concerning this	matter to	the following	:			
LUKE WID	MER							
		(Name of Person)						
AMERICA	N MAN	AGEMENT SPECI	ALISTS	s, LLC				
		(Firm/Company)		J				
PO BOX 6	9-2049							
		(Address)						
ORLANDO	), FL 32	869						
		(City/State and Zip Cod	e)					
For further inf	ormation o	concerning this matter, p	lease call	:		SECKE ALLAH	2016 APR -8	7
LUKE WID	MER		at	407	468-9701	ASSE	=5 T CO	parameters:
	(Name	of Person)	uv		Daytime Telephone Nur	nber]	U	
Regis Divis Clifto 2661 Talla	stration Se sion of Cor on Buildin Executive hassee, Flo	porations g : Center Circle orida 32301		Regist Divisi P.O. B	ration Section on of Corporations dox 6327 assee, Florida 32314	JATÉ ORIDA	Н	
		the following amount:			_			
■ \$25 Filing I	Fee C	3 \$30 Filing Fee & Certificate of Status		Filing Fee & fied Copy	\$60 Filing Fee, Certificate of Sta Certified Copy	itus &		

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

12861 GHL, L	LC		
	(Name of limited liability company	')	
DELAWARE			
·	(Jurisdiction of its organization)		
JANUARY 30,			
	(Date registered with Florida Department of	of State)	
M1500000078	7		
	(Florida Document Number)	- Add	
This limited liab	oility company is withdrawing its certificate of au	athority in this state.	
- L -	(Signature of authorized represent LUKE WIDMER (Typed or printed name of sign	APR -	T
		The second secon	

Filing Fee: \$25.00