

		
(R	equestor's Name)	
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(C	ity/State/Zip/Phone #	<u> </u>
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PICK-UP	TIAW	MAIL
(B	usiness Entity Name)	· · · · · · · · · · · · · · · · · · ·
(D	ocument Number)	
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Certified Copies	Certificates of	Statue
Certified Copies	Certificates of	Status
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Special Instructions to	Filing Officer:	





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MAY 0 2 2019

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

ACCOUNT NO. : I2000000195

REFERENCE: 746269 4320946

AUTHORIZATION : Trebleno

COST LIMIT : \$ 25.00

ORDER DATE: April 30, 2019

ORDER TIME : 9:18 AM

ORDER NO. : 746269-010

CUSTOMER NO: 4320946

FOREIGN FILINGS

NAME: JPMCC 2006-LDP9 US HIGHWAY 1,

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:

FILED 2019 MAY - 1 AM 9:

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

JPMCC 2006-LDP9 US Highway 1, LLC	
(Name of limited liability company)	•
Delaware	
(Jurisdiction of its organization)	•
09/11/2017	
(Date registered with Florida Department of State)	•
M17000008094	
(Florida Document Number) This limited liability company is withdrawing its certificate of authority in this state.	,
An Detail of the Control of the Cont	_
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.)	1711
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)	
(Signature of authorized representative)	
Megan Weaver, Authorized Person	
(Typed or printed name of signce)	

Filing Fee: \$25.00