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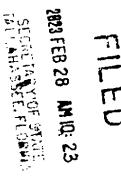
(Requestor's Name)
(Address)
(Address)
(iddioss)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Busiless Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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Withdrawel





A. RAMSEY MAR 0 1 2023 CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

CORPORATE
LIMITED PARTNERSHIP

X LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY

XX CERTIFICATE OF STATUS

CONTACT PERSON: Alexxis Weiland - EXT#

EXAMINER:

COVER LETTER

	tion Section of Corporations		
SUBJECT:	1123 NE 4TH AVE FL, LLC		
SUBJECT:	(Name of Fo	reign Limited Liability	(Company)
Dear Sir or Mada	m:		
The enclosed with	ndrawał and fee(s) are submitt	ed for filing.	
Please return all c	orrespondence concerning thi	s matter to the followin	ig:
Eileen Rhode	es		
	(Name of Person)		_
East Lake M	anagement		
	(Firm/Company)		_
2850 S. Mich	nigan Ave.		
	(Address)		_
Chicago, IL 6	60616		
	(City/State and Zip Co	de)	_
For further inforn	nation concerning this matter.	please call:	
Tania Vargas	s de Perez	312	949-3157
	(Name of Person)		& Daytime Telephone Number)
Divisio P.O. Bo	ation Section n of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a che	ck for the following amount:		
□ S25 Filing Fee	☐ \$30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	■ \$60 Filing Fee. Certificate of Status & Certified Copy

FILED

2023 FEB 28 AM IQ: 23

SECRE TARY OF STATE FALL AHASSEE, FLORIDA NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

1123 NE 4TH AVE FL, LLC
(Name of limited liability company)
State of Delaware
(Jurisdiction of its organization)
May 22, 2019
(Date registered with Florida Department of State)
M19000005077
(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: 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, his date will not be listed as the document's effective date on the Department of State's records.
(Signature of authorized representative)
Eileen Rhodes
(Typed or printed name of signee)

Filing Fee: \$25.00