

M 20000004686

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

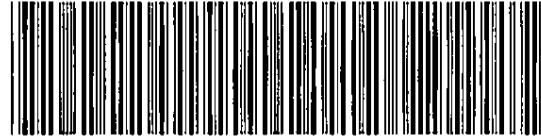
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300388550263

05/27/22 -01904- 012 **25.00

FILED
2022 MAY 27 AM 9:10
TALLAHASSEE, FLORIDA
RECEIVED
2022 MAY 27 PM 2:17
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

cf 5/31/2022

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

BIG DREAM AMERICA LLC

- ___ Art of Inc. File _____
- ___ LTD Partnership File _____
- ___ Foreign Corp. File _____
- ___ L.C. File _____
- ___ Fictitious Name File _____
- ___ Trade/Service Mark _____
- ___ Merger File _____
- ___ Art. of Amend. File _____
- ___ RA Resignation _____
- ___ Dissolution / Withdrawal _____
- ___ Annual Report / Reinstatement _____
- ___ Cert. Copy _____
- ___ Photo Copy _____
- ___ Certificate of Good Standing _____
- ___ Certificate of Status _____
- ___ Certificate of Fictitious Name _____
- ___ Corp Record Search _____
- ___ Officer Search _____
- ___ Fictitious Search _____
- ___ Fictitious Owner Search _____
- ___ Vehicle Search _____
- ___ Driving Record _____
- ___ UCC 1 or 3 File _____
- ___ UCC 11 Search _____
- ___ UCC 11 Retrieval _____

Signature _____

Requested by: SETH

05/27

Name

Date

Time

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Big Dream America LLC

(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

(Name of Person)

Big Dream America LLC

(Firm/Company)

1309 Coffeen Ave Ste 1200

(Address)

Sheridan, WY 82801

(City/State and Zip Code)

For further information concerning this matter, please call:

David A. Svec

323

363-6455

at (_____) _____

(Name of Person)

(Area Code & Daytime Telephone Number)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

\$25 Filing Fee

\$30 Filing Fee &
Certificate of Status

\$55 Filing Fee &
Certified Copy

\$60 Filing Fee,
Certificate of Status &
Certified Copy

FILED

2022 MAY 27 AM 9:10

STATE OF FLORIDA

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Big Dream America LLC

(Name of limited liability company)

Wyoming

(Jurisdiction of its organization)

05-21-20

(Date registered with Florida Department of State)

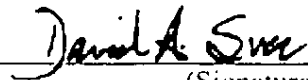
M20000004686

(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: May 28, 2022 (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)

David A. Svec, Authorized Consultant

(Typed or printed name of signee)