M21000

(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:					
Openial instructions to 1 imig officer.					

Office Use Only



400380235584

EEB 1 5 LOSS ALBRITTON CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 471807 8153918

AUTHORIZATION : TANK

COST LIMIT : \$ 25.00

ORDER DATE: February 11, 2022

ORDER TIME : 9:21 AM

ORDER NO. : 471807-005

CUSTOMER NO: 8153918

FOREIGN FILINGS

NAME: 232 SW 8TH STREET MIA 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: Alexxis Weiland - EXT#

EXAMINER:

10

COVER LETTER

TO:		stration S sion of C	Section orporations				
SUBJEC	~r.	232 SW 8th Street MIA LLC					
SOUTE		(Name of Foreign Limited Liability Company)					
Dear Sir	or M	ladam:					
The encl	osed	withdraw	val and fee(s) are submitte	d for filing.			
Please re	eturn	all corres	pondence concerning this	matter to the followir	g:		
Sarah S	Smith	1					
			(Name of Person)	,	_		
232 SW	√8th	Street N	11A LLC				
			(Firm/Company)		_		
777 S F	igue	eroa St.,	Suite 4100				
-			(Address)		_		
Los Ang	geles	s, CA 90	017				
			(City/State and Zip Cod	e)	_		
For furth	er in	formation	concerning this matter, p	lease call:			
Sarah S	Smith	ì		323 at (236-9893		
		(Nam	e of Person)		Daytime Telephone Number)		
	Reg Div P.O	ision of . Box 61	Section Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Enclosed	l is a	check fo	r the following amount:				
□\$25 F	iling	Fee	□ \$30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee. Certificate of Status & Certified Copy		

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

232 SW 8th St	reet MIA LLC	. 28
	(Name of limited liability company)	70 7
Delaware		2020 FEB 14 SHOKE FAR ALLAH
	(Jurisdiction of its organization)	
June 16, 2021		AH 9: 24 OF STATI
	(Date registered with Florida Department of State)	7 A 2
M2100000751	1	\ \frac{\fracc}\frac{\fracc}}}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac}}}}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac}}}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac}}}}}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac}}}}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac}}}}}}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac}}}}}}}}{\frac{\frac{\frac
-	(Florida Document Number)	
more than 90 o Note: If the da	e date is listed, the date must be specific and cannot be prior to d days after filing.) the inserted in this block does not meet the applicable statutory files not be listed as the document's effective date on the Department	iling requirements.
	Josle Gelfman	
	(Signature of authorized representative)	
	Josh Gelfman	
	(Typed or printed name of signee)	

Filing Fee: \$25.00