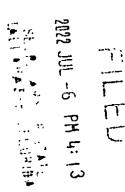
F05000006936

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



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D CONNELL

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

		ACCOUNT N	·	120000	000195
		REFEREN	CE :	777531	7633597
		AUTHORIZATI	ON :	VX	
		COST LIM	IIT :	35.00	Clada
ORDER	DATE :	June 29, 2022		- 	-
ORDER	TIME :	2:04 PM			
ORDER	NO. :	777531-055			
CUSTO	MER NO:	7633597			
				· 	
		FOREIG	N FILI	<u>INGS</u>	
	NAME:	CTF DEVELO	PMENT,	INC.	
XX CORPORATE					
LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY					
xxxx v	VITHDRAWA	AL/CANCELLATIO	N		
		in, crincina in a			
PLEASI	E RETURN	THE FOLLOWING	AS PR	OOF OF I	FILING:
XX		FIED COPY STAMPED COPY			
		FICATE OF STAT	US		

EXAMINER:

CONTACT PERSON: Alexxis Weiland - EXT#



July 8, 2022

CSC

Please give original submission date as file date.

SUBJECT: CTF DEVELOMENT, INC.

Ref. Number: F05000006936

We have received your document for CTF DEVELOMENT, INC. and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

PLEASE ADD THE STATE OF DELAWARE TO THE THIRD LINE OF THE FORM.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell Regulatory Specialist II Supervisor

Letter Number: 222A00015293



COVER LETTER

10:	Amendment Section Division of Corporations	
SUBJ	ECT: CTF DEVELOMENT, INC.	
5015 6		(Name of Corporation)
DOC	UMENT NUMBER: F05000006936	
The er	nclosed withdrawal application and	I fee are submitted for filing.
Please	return all correspondence concerning	g this matter to the following:
	Bradley D. Hornbacher	•
		(Name of Person)
	CTF Development, Inc.	
		(Firm/Company)
	1450 Brickell Avenue, Suite 2620	
		(Address)
	Miami, FL 33131	
	(City/State and Zip code)
For fu	rther information concerning this ma	atter, please call:
	y D. Hombacher	,786 517-2929
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclos	sed is a check for the amount:	
□ \$3:	5 Filing Fee	2 □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certified Copy Certificate of Status & Certified (Additional copy is Enclosed)
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

CTF DEVELOMENT, INC.	
(Name of Corporatio	on)
F05000006936	
(Document Number of Corporati	on (if known)
November 30, 2005 DELAWARE	
(Incorporated Under Laws of and date authorized to tran	nsact business/conduct its affairs)
This corporation is no longer transacting business or conductin voluntarily surrenders its authority to transact business or conduct. This corporation revokes the authority of its registered agent appoints the Department of State as its agent for service of proceeding it was authorized to transact business or conduct affairs in	in Florida to accept service on its behalf and ess based on a cause of action arising during the
The following is a current mailing address for the corporation: 1450 Brickell Avenue, Suite 2620	2022
(Mailing Address)	-6 PM
Miami, FL 33131 (City/ State /Zip)	PR 4: 13
The corporation agrees to notify the Department of State in the	June 29, 2022
(Mignature of a diffector president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
Bradley D. Hornbacher	Vice President and Secretary
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35