## L13000/29624

(Re	equestor's Name)			
(Ac	Idress)			
(Ac	Idress)			
(Ci	ty/State/Zip/Phone #	()		
PICK-UP	WAIT	MAIL		
<b>(D</b>				
(Bt	usiness Entity Name	)		
(Document Number)				
<b>(</b>	· · · · · · · · · · · · · · · · · · ·			
Certified Copies	Certificates o	f Status		
Special Instructions to Filing Officer:				
1				

Office Use Only



600292519016

600292519016 11/22/16--01022--002 \*\*60.00

16 NOV 22 PH I2: 01
DIVISION OF CUEF BEATIGHS

O SIMMONS NOV 2 3 2016

## **COVER LETTER**

TO:

Registration Section

Division of	Corporations			
SUBJECT:		State Rourieign Limited Liability C	te Boca Ro	aton LL
Dear Sir or Madam:				
The enclosed withdra	wal and fee(s) are submitte	d for filing.		
Please return all corre	espondence concerning this	matter to the following:		
Mark 1	UeinSteen (Name of Person)			
1640-54	b St. #1	12		
	(Firm/Company)			
	(Address)			
Souta	Louica, CA			
	(City/State and Zip Coo	le)		
For further information	on concerning this matter, p	olease call:		
Karen	ime of Person)		295 · 3430 Daytime Telephone Number)	<u>x</u> 212
Registration Division of Clifton Buil 2661 Execu	Corporations	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
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	

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

21733 State Roide Boca Raton	lle
(Name of limited liability company)	
CALIFORNIA	
(Jurisdiction of its organization)	
9/12/2013	
(Date registered with Florida Department of State)	
L13000129624	
(Florida Document Number)	
This limited liability company is withdrawing its certificate of authority in this state.	
Mark Warrles	
(Signature of authorized representative)	
Mark Weinstein	
(Typed or printed name of signee)	9 <b>6</b>
	16 NOV 22
	TILEL NOV 22 PHIL
	PH 12:
	16 HOV 22 PH 12:1
	= C

Filing Fee: \$25.00