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(Re	equestor's Name)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
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(Bı	usiness Entity Na	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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Midhdrawal Statement

NOV 21 2019 | ALBRITTON



LIMA MOODY, PARALEGAL (850) 205-8173 LMOODY@DEALERLAWYER.COM

VIA HAND DELIVERY

November 20, 2019

Florida Department of State Registration Section Division of Corporations Tallahassee, Fl. 32301

Re: Withdrawal Statement re: Articles of Amendment to Articles of Organization

Corma Autmotive, LLC / Florida Document #L17000062367

Dear Sir or Madam:

Please find enclosed your Cover Letter, the referenced Withdrawal Statement, and Bass Sox Mercer check #s 5792 in the amount of \$25.00 for the filing fee.

Please file the Withdrawal Statement and provide our runner with a RECEIVED stamped copy today. I understand that hand delivered items are filed at the time of delivery and that our runner may pick up the FILED stamped copy within the next few days.

If you have any questions, please do not hesitate to contact me. Thank you very much.

Sincerely yours,

Jisa Moody

Enclosures

COVER LETTER

	Registration Section Division of Corporations				
SUBJEC	CORMA AUTOMOTIVE, LLC	CORMA AUTOMOTIVE, LLC			
SUBJEA	Name of Li	mited Liability Con	npany		
Dear Sir	or Madam:				
The enclo	osed Withdrawal Statement and fee(s) are s	submitted for filing.			
Please re	turn all correspondence concerning this ma	atter to the following	g:		
LOGA	N PARKER				
	Name of Person				
BASS	SOX MERCER				
	Firm/Company				
2822 F	REMINGTON GREEN CIRCLE				
	Address				
TALLA	HASSEE, FL 32308				
	City/State and Zip Cod	e			
LPAR	KER@DEALERLAWYER.COM				
	E-mail address: (to be used for future annu	ial report notification	on)		
For furth	er information concerning this matter, plea	se call:			
LOGA	N PARKER	850	878-6404		
	Name of Person	Area Code	Daytime Telephone Number		
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		

TO:

WITHDRAWAL STATEMENT

Pursuant to section 605.0208, Florida Statutes, I hereby submit the following withdrawal statement withdrawing a record before it takes effect: CORMA AUTOMOTIVE, LLC FIRST: The name of the limited liability company is:				
	1.17000062267			
SECOND: The Florida Document number of the limite	ed liability company is:			
THIRD: The record to be withdrawn is: ARTICLES OF AMENDMENT TO ARTICLES OF				
ORGANIZATION FILED ON OCTOBER 8	, 2019			
Or This record is withdrawn in accordance w	LOGAN S. PARKER, ESQ.			
Signature of person submitting withdrawal	Typed or printed name of signature			
Signature of person submitting withdrawal	Typed or printed name of signature			
Signature of person submitting withdrawal	Typed or printed name of signature			
Signature of person submitting withdrawal	Typed or printed name of signature			

Filing fee: \$25.00 Certified Copy: \$30.00 (optional)

CR2E140 (2/14)