M00000000918

(Requestor's Name)				
(Address)				
(Address)				
(Madress)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
•				
(Dusings Fields Name)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
•				
Special Instructions to Filing Officer:				

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2015 JAN 12 PM 1:54 SECRETARY OF STATE

IAM 2.3 2015 I. HARRIS

COVER LETTER

	•		•
TO: Registration Division of	n Section Corporations		
SUBJECT:	Sarasota, S (Name of Foi	elf Stova reign Limited Liability (Al, UC Company)
Dear Sir or Madam:			
The enclosed withdr	awal and fee(s) are submitte	d for filing.	
Please return all corn	respondence concerning this	matter to the following	:
Robin Hocheno	loner		
	(Name of Person)		
Veritage Mana	gement, Inc.		
	(Firm/Company)		
8171 Maple La	wn Blvd #375		
	(Address)		
Fulton, MD 20	759		
	(City/State and Zip Cod	le)	
For further informati	on concerning this matter, p	lease call:	
Robin Hocheno	loner	240	295-1623
(N	ame of Person)	(Area Code &	Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		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

Sarasota Self Storage, UC
(Name of limited liability company)
Maryland(Jurisdiction of its organization)
(Date registered with Florida Department of State)
M 0060000918
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
(Signature of authorized representative) Patricia Bowditch
(Typed or printed name of signee)

Filing Fee: \$25.00

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