Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-0821

Fax Number : (850)558-1515

TAMPA L.K.E. LLC

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LLC DISSOLUTION OR WITHDRAWAL

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		CO	VER LETTER	,
	istration sion of C	Section 'orporations		ŗ
(MED 11/2/2)	Tampa	L.K.E. LLC		
SUBJECT:	**	(Maine of Fore	ign Limited Liability	Company)
Dear Sir or N	ladam.			
The enclosed	withdra	wal and fee(s) are submitted	I for filing.	
Please return	all corre	spondence concerning this i	matter to the following	3.
	··	(Name of Person)		-
		(Traine or Person)		
	,	(Firm/Company)		-
		(Address)		-
		(City/State and Zip Code	r)	_
For further in	ıformatic	on concerning this matter, p	lease call	
			at (
	(Na	me of Person)	(A) en Code S	è Daytime Telephone Number)
Reg Div P.C	vision c), Box (on Section of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is	a check	for the following amount:		
□\$25 Filin	g Fee	S30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status &

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NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Tampa L.K.E. LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
December 28, 2000
(Date registered with Florida Department of State)
M0000002701
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
Effective Date, if other than the date of filing:
this date will not be listed as the document's effective date on the Department of State's records. Decusion of Maria
Anthony Matala
(Typed or printed name of signee)

Filing Fee: \$25.00