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SECRETARY OF STATE
TALL AHASSEF FI DOIN

UNIVE 3 2015 J. HARRIS

COVER LETTER

TO:

Registration Section

Division of	Corporations		
SUBJECT:	Bonit (Name of For	a Spvings reign Limited Liability	SELF STORAGE, LUC Company)
Dear Sir or Madam:			
The enclosed withdr	awal and fee(s) are submitte	d for filing.	
Please return all corr	espondence concerning this	matter to the following	g:
Robin Hocheno	loner		
	(Name of Person)		_
Veritage Manaç	gement, Inc.		
	(Firm/Company)		_
8171 Maple La			_
	(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)		k 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:		
	□ \$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

BONITA SPRINGS SELF STORAGE, LLC (Name of limited liability company)
(Name of limited liability company)
DELAWARE
(Jurisdiction of its organization)
07/18/2002
(Date registered with Florida Department of State)
M02000001877
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
Moonderk
(Signature of authorized representative)
Patricia Bowditch
(Typed or printed name of signee)

Filing Fee: \$25.00

2015 JAN 12 PM 4: 56
SEGRETARY OF STATE
TALL AHASSEE, FLORID