

MO2000003419

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Document Number)

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18 APR 24 PM 4:19
DEPT OF STATE
TALLAHASSEE, FLORIDA

J. LEGGETT
APR 25 2018

FILED
2018 APR 24 AM 11:12
DEPT OF STATE
TALLAHASSEE, FLORIDA

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 177792 7447138

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : April 24, 2018

ORDER TIME : 9:18 AM

ORDER NO. : 177792-135

CUSTOMER NO: 7447138

FOREIGN FILINGS

NAME: LAKE DEER APARTMENTS I, LLC

____ CORPORATE
____ LIMITED PARTNERSHIP
XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY
____ CERTIFICATE OF STATUS

CONTACT PERSON: Roxanne Turner - EXT#

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LAKE DEER APARTMENTS I, LLC
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Debra Hartman, VP Accounting

(Name of Person)

c/o Fieldstone Properties I, LLC

(Firm/Company)

1719 Route 10 East, Suite 220

(Address)

Parsippany, NJ 07054

(City/State and Zip Code)

For further information concerning this matter, please call:

Debra Hartman, VP Accounting

(Name of Person)

973

455-8882

at ()

(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

LAKE DEER APARTMENTS I, LLC

(Name of limited liability company)

GEORGIA

(Jurisdiction of its organization)

12/20/2002

(Date registered with Florida Department of State)

M02000003419

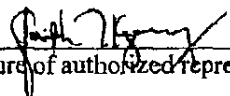
(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

Effective Date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.


(Signature of authorized representative)

Joseph Kazamovsky, Managing Member

(Typed or printed name of signee)

Filing Fee: \$25.00

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