

M03000000295

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

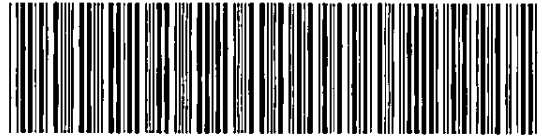
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500330362995

APPROVED
AND
FILED
2019 JUN -3 AM 8:22
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
19 JUN -3 PM 4:27
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

T GLASS

JUN 04 2019

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

ACCOUNT NO. : I20000000195
REFERENCE : 789472 5034981
AUTHORIZATION : *Lydia Cohen*
COST LIMIT : \$ 25.00

ORDER DATE : June 3, 2019
ORDER TIME : 3:31 PM
ORDER NO. : 789472-005
CUSTOMER NO: 5034981

APPROVED
AND
FILED
2019 JUN -3 AM 8:22
TALLAHASSEE, FL
CORPORATION SERVICE COMPANY

FOREIGN FILINGS

NAME: ATLANTIC SERVICE & SUPPLY
LLC

☐ CORPORATE
☐ LIMITED PARTNERSHIP
☒ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Lydia Cohen - EXT# 62974

EXAMINER: _____

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Atlantic Service & Supply LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

01/22/2003

(Date registered with Florida Department of State)

M03000000295

(Florida Document Number)

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

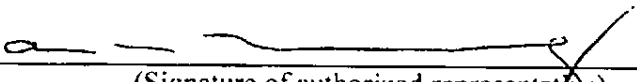
Effective Date, if other than the date of filing: _____ (optional)

(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.

APPROVED
AND
FILED

2019 JUN -3 AM 8:22


(Signature of authorized representative)

Ana M. Menendez, Manager

(Typed or printed name of signee)

Filing Fee: \$25.00