

MO4000000 474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

M. MILLIGAN

MAR 20 2018

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Venice, FL Retail 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:

Mila Pinkhasov

\_\_\_\_\_  
(Name of Person)

Venice, FL Retail LLC

\_\_\_\_\_  
(Firm/Company)

295 Madison Avenue 37th Floor

\_\_\_\_\_  
(Address)

New York, NY 10017

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Mila Pinkhasova

\_\_\_\_\_  
(Name of Person)

212

at (\_\_\_\_\_) \_\_\_\_\_

(Area Code & Daytime Telephone Number)

753-4570 ext. 217

**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:

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|--|---|--|--|

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Venice, FL Retail LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

February 5, 2004

(Date registered with Florida Department of State)

M04000000474

(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: 3/8/2018 (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.

By: R.P. & S.W. Manage Co., Managing Member

[Signature], President  
(Signature of authorized representative)

Ronald J. Dehl

(Typed or printed name of signee)

Filing Fee: \$25.00

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