

M 04 000002985

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

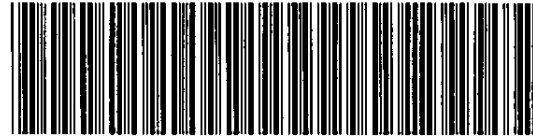
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400262098884

07/14/14--01036--027 **25.00

14 JUL 14 PM 4:21

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SCI University Marketplace Fund 6, 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:

Gary Weldin

(Name of Person)

SCI University Marketplace Fund 6, LLC

(Firm/Company)

5741 Vista del Monte Ave

(Address)

Van Nuys CA 91411-3358

(City/State and Zip Code)

For further information concerning this matter, please call:

Gary Weldin

(Name of Person)

818

994-6901

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

SCI University Marketplace Fund 6, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

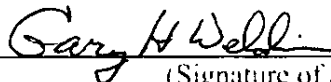
July 26, 2004

(Date registered with Florida Department of State)

M04000002985

(Florida Document Number)

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



(Signature of authorized representative)

Gary Weldin

(Typed or printed name of signee)

16 JUL 14 PM 4:21

Filing Fee: \$25.00