(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



800321394228

U رتا

2018 DEC -17 注 (中

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500 ACCOUNT NO. : I20000000195 REFERENCE 517920 AUTHORIZATION COST LIMIT ORDER DATE: December 6, 2018 ORDER TIME : 8:47 AM ORDER NO. : 517920-010 CUSTOMER NO: 163137A FOREIGN FILINGS NAME: SANDY LANE RESIDENTIAL 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

EXAMINER:

CONTACT PERSON: Emily Croft - EXT# 62925

COVER LETTER

	gistration Section ision of Corporations			
SUBJECT:	Sandy Lane Residential LLC			
	(Name of F	oreign Limited Liability	Company)	
Dear Sir or i	Madam:			
The enclosed	d withdrawal and fee(s) are submitt	ted for filing.		
Please return	all correspondence concerning the	is matter to the following	:	
				٠ <u>٠</u> ٠, نځ
				DEC :
	(Name of Person)			1
				٠. ــا
				. D
	(Firm/Company)	 ,,		က်
	(Time company)			رة ص
				•
	(Address)			
	(City/State and Zip Co	ide)		
	(,	,		
For further in	formation concerning this matter,	please call:		
	•	•		
		at ()	
	(Name of Person)	(Area Code &	Daytime Telephone Number)	
STE	REET/COURIER ADDRESS:	MAII	ING ADDRESS:	
Reg	istration Section	Regist	ration Section	
Registration Section Division of Corporations Clifton Building			Division of Corporations	
	ton Building I Executive Center Circle		ox 6327	
	ahassee, Florida 32301	i alian	assee, Florida 32314	
Enclosed is a	check for the following amount	:		
□ \$25 Filing	Fee S30 Filing Fee & Certificate of Status	☐ \$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status &	
			Certified Conv	

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Sandy Lane Residential LLC	
(Name of limited liability company)	
Delaware	
(Jurisdiction of its organization)	1.5
September 1, 2004	, ——, CD
(Date registered with Florida Department of State)	
M0400003598	
(Florida Document Number)	
	άi
This limited liability company is withdrawing its certificate of authority in this state.	28
Effective Date, if other than the date of filing:(o	optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of f more than 90 days after filing.)	filing or
Note: If the date inserted in this block does not meet the applicable statutory filing re-	
this date will not be listed as the document's effective date on the Department of Stat	e's records.
Tell Cornettel	
(Signature of authorized representative)	
Rhonda G. Matty	
(Typed or printed name of signee)	

Filing Fee: \$25.00