

MO4 0000004640

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

MAR 25 2016

S MASON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HICKORY HAMMOCK FL, 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:

Salvatore Pomo

(Name of Person)

HICKORY HAMMOCK FL, LLC

(Firm/Company)

448 Viking Drive, Suite 220

(Address)

Virginia Beach, VA 23452

(City/State and Zip Code)

For further information concerning this matter, please call:

Salvatore Pomo

(Name of Person)

757

at ()

463-5000 Ext 320

(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

HICKORY HAMMOCK FL, LLC

(Name of limited liability company)

VIRGINIA

(Jurisdiction of its organization)

October 21, 2004

(Date registered with Florida Department of State)

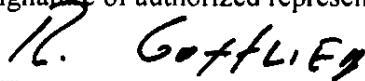
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(Florida Document Number)

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



(Signature of authorized representative)



(Typed or printed name of signee)

Filing Fee: \$25.00

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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