MD5000000524

(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



200343301992

04/20/20--01016--004 **25.00

17 | 1 ... (= 1.) 2020 AFR 20 PM 4: 30

Wilhdrawal

APR 3 0 2020 I ALBRITTON

COVER LETTER

то:		istration ision of (Section Corporations			
SUBJE	ст	Childre	n's Choice Nevada Propert	y, L.L.C.		
30032	.C1.		(Name of Fo	reign Lim	ited Liability	Company)
Dear Si	ir or 1	Madam:				
The end	close	d withdra	wal and fee(s) are submitte	ed for filir	g.	
Please	returr	all corre	espondence concerning this	s matter to	the followin	g:
Daniel	le De	mmons				
			(Name of Person)			_
Bright	Hori	zons Fam	nily Solutions			
			(Firm/Company)			_
200 Ta	ılcott	Avenue				
			(Address)			-
Watert	lown,	MA 024	72			
	•	•	(City/State and Zip Co	de)		_
For fur	ther i	nformatie	on concerning this matter,	please call	l:	
Daniel	le De	mmons		at	617	673-3383
		(Na	ime of Person)			& Daytime Telephone Number)
	Re Di P.0	vision o D. Box	on Section of Corporations			Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclos	ed is	a check	for the following amount	:		
■\$ 25	Filin	g Fee	☐ \$30 Filing Fee & Certificate of Status		Filing Fee & tified Copy	 \$60 Filing Fee, Certificate of Status & Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Children's Choic	e Nevada Property, L.L.C.			
	(Name of limited liability company)		2020 %	
Nevada		• •	2:	سد ا
	(Jurisdiction of its organization)		1.1.120	-
January 25, 2005	5			\
	(Date registered with Florida Department of State)		PH 4: 30	-
M05000000524		Ë	30	
	(Florida Document Number)			
(If an effective more than 90 o Note: If the da	e date is listed, the date must be specific and cannot be prior to days after filing.) ate inserted in this block does not meet the applicable statutory not be listed as the document's effective date on the Department.	date of fi	quireme	ents.
	(Signature of authorized representative) Stephen Dreier	 -		
	(Typed or printed name of signee)			

Filing Fee: \$25.00