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(ке	questor's Name)	
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COVER LETTER

TO: Registration Division of C			
SUBJECT: <u>SCI</u>	MARKET SO	QUARE Fu	nd 5, LLC ompany)
Dear Sir or Madam:			
The enclosed withdra	wal and fee(s) are submitted	for filing.	
Please return all corre	espondence concerning this t	matter to the following:	
MARTIN	WASSERMAN (Name of Person)	4	
MARTIN	WASSERMAN (Firm/Company)		
	Address) Monica Cal (City/State and Zip Code		90402
	on concerning this matter, pl	lease call:) 454-8870 Daytime Telephone Number)
Registration Division of Clifton Buil 2661 Execu	Corporations	Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, Florida 32314
Enclosed is a check	for the following amount:		
\$25 Filing Fee	☐ \$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

SCI MARKET SQUARE Fund 5, LLC (Name of limited liability company)	
(Name of limited liability company)	
Dela wave (Jurisdiction of its organization)	
(Jurisdiction of its organization)	
November 2006 (Date registered with Florida Department of State)	
M 0 500000 1632 (Florida Document Number)	
(Florida Document Number)	
This limited liability company is withdrawing its certificate of authority in this Effective Date, if other than the date of filing:	(optional)
If an effective date is listed, the date must be specific and cannot be prior to date more than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory filing date will not be listed as the decomment's effective date on the Department.	ling requirements,
this date will not be listed as the document's effective date on the Department of Masseman (Signature of authorized representative)	& 77
MARTIN WASSERMAN (Typed or printed name of signee)	FILED 2011 DEC 28 AM 8: 2 SLUCKHASSEE, FLORID

Filing Fee: \$25.00