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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:
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Office Use Only



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OCT 1 / 2018

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195						
REFERENCE : 446788 5158956						
AUTHORIZATION: Spullelle man						
COST LIMIT : \$25-00						
ORDER DATE: October 16, 2018						
ORDER TIME : 3:34 PM						
ORDER NO. : 446788-005						
CUSTOMER NO: 5158956						
FOREIGN FILINGS						
NAME: CITISQUARE INVESTMENTS, LLC						
CORPORATE						
LIMITED PARTNERSHIP XXX LIMITED LIABILITY COMPANY						
XXXX WITHDRAWAL/CANCELLATION						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY						
XX PLAIN STAMPED COPY CERTIFICATE OF STATUS						

EXAMINER: ____

CONTACT PERSON: Emily Croft - EXT# 62925

COVER LETTER

	gistration S vision of C	Section forporations		
eup ie <i>c</i> e.		re Investments, LLC		
SUBJECT:		(Name of For	eign Limited Liability (Company)
Dear Sir or 1	Madam:			
The enclosed	d withdray	val and fee(s) are submitted	f for filing.	
Please return	n all corre	spondence concerning this	matter to the following	:
Katherine C	Carpentier			
		(Name of Person)		-
c/o RFR Ho	olding LL(2		
		(Firm/Company)		-
390 Park A	venue, 3rd	Floor		_
	•	(Address)		
New York,	New York	x 10022		
		(City/State and Zip Cod	c)	-
For further i	informatio	π concerning this matter, p	lease call:	
Katherine C	Carpentier		212 at (308-1000
	(Nar	ne of Person)		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 Tallahassec, Florida 32314		
Enclosed is	a check f	or the following amount:		
□ \$ 25 Filin	g Fee	S30 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

Citisquare Investments, LLC	
(Name of limited liability company)	·. 8
Delaware	
(Jurisdiction of its organization)	J.
August 9, 2005	<u> </u>
(Date registered with Florida Department of State)	4
M05000004406	725
(Florida Document Number)	
This limited liability company is withdrawing its certificate of authority in this state. 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 filin this date will not be listed as the document's effective date on the Department of	g requirements,
(Signature of authorized representative) Frank Mangieri	
(Typed or printed name of signee)	

Filing Fee: \$25.00