## 50000055

(Requestor's Name)	
(, , , , , , , , , , , , , , , , , , ,	
(Áddress)	
(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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CAPITAL CON 417 E. Virginia Street, Suite	e I. • Tullahassee, F	lorida 32301		پ ۲
(850) 224-8870 • 1-800-3	342-8062 • Fax (8	50) 222-1222		
SONNIE MINE ROAI	D MULBERR	Y LLC		
			Art	t of Inc. File
			LTI	D Partnership File
				reign Corp. File
			L.C	C. File
			Fic	ctitious Name File
			Tra	ade/Service Mark
			Me	erger File
			Ar	rt, of Amend. File
			R.ª	A Resignation
			Di	issolution / Withdrawal
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Walk-In	Will Pick Up		C	Courier

TO: Registration Section Division of Corporations

## BONNIE MINE ROAD MULBERRY, LLC

SUBJECT:

(Name of Foreign Limited Liability Company)

863

at (

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**RICHARD E. STRAUGHN** 

(Name of Person)

STRAUGHN & TURNER, P.A.

(Firm/Company)

255 MAGNOLIA AVENUE SW

(Address)

WINTER HAVEN, FL 33880

(City/State and Zip Code)

For further information concerning this matter, please call:

**RICHARD E. STRAUGHN** 

(Name of Person)

(Area Code & Daytime Telephone Number)

293-1184

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Enclosed is a check for the following amount:

S25 Filing Fee	🗆 \$30 Filing Fee &	□\$55 Filing Fee &	🗆 \$60 Filing Fee,
	Certificate of Status	Certified Copy	Certificate of Status &
			Certified Copy

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

BONNIE MINE ROAD MULBERRY, LLC	2121 JUL	-
(Name of limit	ted liability company)	2 <b>4</b>
DELAWARE		3
(Jurisdiction	of its organization)	
SEPTEMBER 30, 2005	52	
(Date registered with	Florida Department of State)	
M05000005578		

(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 of filing or more than 90 days after filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(Signature of authorized representative)

RICHARD E. STRAUGHN

(Typed or printed name of signee)