M0500006810

(Re	equestor's Name)	
. (Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nam	ne)
(Dc	ocument Number)	.
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		

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January 31, 2018

ANGELO RUSSO 800 BOYLSTON ST STE 1300 BOSTON, MA 02199

SUBJECT: WILDER/BN PARCEL C LLC

Ref. Number: M05000006810

We have received your document for WILDER/BN PARCEL C LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Limited Liability Company, but your entity is a Foreign Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 918A00002123

Brittany M Figueroa Regulatory Specialist II Registration/Qualification Section

www.sunbiz.org

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: WILDER BY PARCEL C LL C (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:			
ANGELO RUSSO (Name of Person)			
THE WILDER COMPANIES, LTD. (Firm/Company)			
EDO BOYLSTON STEEET, SUITE # 1300 (Address)			
BOSTON, MA 02199 (City/State and Zip Code)			
For further information concerning this matter, please call:			
(Name of Person) at (617) 896-4953 (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 Certificate of Status □ \$55 Filing Fee & □ \$60 Filing Fee, Certified Copy Certified Copy Certified Copy			

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

WILDER / BN PARCEC C LLC (Name of limited liability company)
(Name of limited liability company)
DELAWARE
(Jurisdiction of its organization)
(Date registered with Florida Department of State)
(Date registered with Florida Department of State)
M0500000 6810
(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:
(Signature of authorized representative)
DAVID J. MALLEN
(Typed or printed name of signee)

Filing Fee: \$25.00

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OFFISION OF CORPORATIONS
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