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DIVISION OF CERPOSATION

HUL 0 8 2021 R. HUNT

COVER LETTER

SUBJECT:	843 PROFE	enes 12	NAPLES, LLC
	(Name of For	eign Limited Liability	Company)
Dear Sir or Madam:			
The enclosed withdrawa	I and fee(s) are submitte	d for filing.	
Please return all correspo	ondence concerning this	matter to the followin	g:
mila	ha Roe hu		
Myla s	(Name of Person)		_
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\$43 PR	(Firm Company)	MAPIES, L	KC
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F.O. D	vef 4464		_
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For further information of	(City/State and Zip Cod	olease call:	. 480-9840
For further information of Myla So	(City/State and Zip Cod	olease call:) USD - 9840 & Daytime Telephone Number)
For further information of Myla So	(City/State and Zip Code concerning this matter, p SAL JOH of Person)	olease call:) USD - 9840 R Daytime Telephone Number) Street Address:
For further information of My/a So (Name Mailing Address Registration	(City/State and Zip Code concerning this matter, p STAC FORM of Person) 888: Section	olease call:	Street Address: Registration Section
For further information of Myla So (Name Mailing Address Registration Division of Communication Com	(City/State and Zip Code concerning this matter, put the concerning the concerning this matter, put the concerning	olease call:	Street Address: Registration Section Division of Corporations
For further information of My/a So (Name Mailing Address Registration	(City/State and Zip Code concerning this matter, p Section Corporations	olease call:	Street Address: Registration Section Division of Corporations The Centre of Tallahasses 2415 N. Monroe Street, S
For further information of Control of Contro	(City/State and Zip Code concerning this matter, p Section Corporations	olease call:	Street Address: Registration Section Division of Corporations The Centre of Tallahasses
For further information of Control of Contro	(City/State and Zip Code concerning this matter, purple of Person) 888: Section Corporations 27 F1. 32314	at <u>31</u> (Area Code &	Street Address: Registration Section Division of Corporations The Centre of Tallahasses 2415 N. Monroe Street, S
For further information of Myla So (Name Mailing Address Registration Division of OP.O. Box 632 Tallahassec. Enclosed is a check for	(City/State and Zip Code concerning this matter, pure for Person) SSS: Section Corporations 27 F1. 32314 the following amount: 1 \$30 Filing Fee &	at (<u>39</u> (Area Code &	Street Address: Registration Section Division of Corporations The Centre of Tallahassec 2415 N. Monroe Street, S Tallahassec, FL 32303
For further information of My/a So (Name Mailing Address Registration Division of OP.O. Box 632 Tallahassec. Enclosed is a check for	(City/State and Zip Code concerning this matter, purely of Person) SSE: Section Corporations 27 F1. 32314 the following amount: I \$30 Filing Fee & Certificate of Status	at <u>307</u> at <u>(Area Code &</u>	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, S Tallahassee, FL 32303

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

By 5 PROPERTIES IF WAS DES, LLC (Name of limited liability company)	
(Name of limited liability company)	
Florida (Jurisdiction of its organization)	
(Jurisdiction of its organization)	
TEBRUARY 16, 2006 (Date registered with Florida Department of State)	
(Date registered with Florida Department of State)	
MOG000000 977	
(Florida Document Number)	
This limited liability company is withdrawing its certificate of authority in this state.	
If an effective date is listed, the date must be specific and cannot be prior to date of figures than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory filing rec	quirements,
If an effective date is listed, the date must be specific and cannot be prior to date of finore than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory filing rechis date will not be listed as the document's effective date on the Department of State Signature of authorized representative)	iling or quirements,
If an effective date is listed, the date must be specific and cannot be prior to date of finore than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory filing reclaims date will not be listed as the document's effective date on the Department of State	iling or quirements,

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SCHETARY OF STATE