

MOB000002679

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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FEB 02 2015  
S. YOUNG

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: NNN AVENTURA HARBOUR CENTRE 7, LLC  
(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:

DENNIS SIEGLE  
(Name of Person)

SIEGLE Family LIMITED PARTNERSHIP  
(Firm/Company)

1673 LENOX DRIVE  
(Address)

WACONIA MN 55387  
(City/State and Zip Code)

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For further information concerning this matter, please call:

DENNIS SIEGLE at ( 952 ) 442-2703  
(Name of Person) (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      ☐ \$30 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**

NNN AVENTURA HARBOUR CENTRE 7, LLC  
(Name of limited liability company)

Delaware DELAWARE  
(Jurisdiction of its organization)

5/15/2006  
(Date registered with Florida Department of State)

H156876 M0600002679  
(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

Dennis Siegle GP  
(Signature of authorized representative)

DENNIS SIEGLE  
(Typed or printed name of signee)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Filing Fee: \$25.00**