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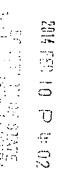
(Reque	stor's Name)	
(Addres	ss)	
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(City/Si	ate/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Busine	ess Entity Nar	ne)
(Docum	nent Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Filir	on Officer	
Special instructions to Filli	ig Officer.	İ

Office Use Only



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B. BOSTICK
FEB 12 2014
EXAMINER

COVER LETTER

TO: Registration Division of	n Section Corporations			
SUBJECT: MB	C- SAWGYA 66 Name of Fo	, LLC	Company	
	(Haine of Fo	reigh Ellinted Liability (company)	
Dear Sir or Madam:				
The enclosed withdr	awal and fee(s) are submitte	d for filing.		
Please return all corr	respondence concerning this	matter to the following	:	
Andre	(Name of Person)			
CS Ve	ntwes LLC (Firm/Company)			
<u>455</u> s.	Legacy Trai	l, Suite E·l	do	70. 5. 5. 5. 5. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.
St. Augu	Stine FL (City/State and Zip Cod	32092 le)		STATE STATE
For further informati	on concerning this matter, p	lease call:	 	oni k
Ancrew	muyay ame of Person)	at (90 U (Area Code &) 940 · 3673 Daytime Telephone Number)	<u></u>
Registration Division of Clifton Bui 2661 Execu	Corporations	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

MBC - Sawaruss, LLC Name of limited liability company)		
(Name of limited liability company)		
DE		
(Jurisdiction of its organization)		
5/11/2006 (Date registered with Florida Department of State)		
(Date registered with Florida Department of State)		
M06000002753		
(Florida Document Number)		
This limited liability company withdrawing its certificate of authority in thi	s state.	
(Signature of authorized representative)		
Anarew Murray	614	o a
(Typed or printed name of signee)	7. E	
·		_ ; 414#
	- 원교 (#	7-7-9
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	三进 田田) }

Filing Fee: \$25.00