

MO6000000 2847

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

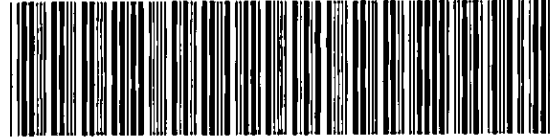
(Business Entity Name)

(Document Number)

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MAR 07 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bedford Capital Southeast, 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:

Laura Collins

(Name of Person)

Bedford Cost Segregation

(Firm/Company)

431 East Horatio Ave. Suite 310

(Address)

Maitland, FL 32751

(City/State and Zip Code)

For further information concerning this matter, please call:

Laura Collins 407 478-4037

(Name of Person) at () (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:

- | | | | |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &
Certified Copy | <input type="checkbox"/> \$60 Filing Fee,
Certificate of Status &
Certified Copy |
|---|---|--|--|

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Bedford Capital Southeast, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

May 22, 2006

(Date registered with Florida Department of State)

M06000002847

(Florida Document Number)

FILED
20 FEB 13 AM 7:42
CLERK OF THE COURT
JUDICIAL CIRCUIT IN AND FOR
THE STATE OF FLORIDA
TALLAHASSEE

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

Effective Date, if other than the date of filing: 2/10/2020 (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)

Laura Collins

(Typed or printed name of signee)

Filing Fee: \$25.00