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(Re	equestor's Name)	
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PICK-UP	WAIT .	MAIL
(Bu	siness Entity Nam	ne)
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer	
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COVER LETTER

TO:

Registration Section

Division of	Corporations					
SUBJECT:	Union Park (Name of For	Self Stor reign Limited Liability				
Dear Sir or Madam:						
The enclosed withdr	rawal and fee(s) are submitte	d for filing.				
Please return all cor	respondence concerning this	matter to the followin	g:			
Robin Hochen	doner					
- 	(Name of Person)		_			
Veritage Mana	gement, Inc.					
	(Firm/Company)	* *** *** * * * * * * * * * * * * * *	_			
8171 Maple La	wn Blvd #375					
	(Address)	•	_			
Fulton, MD 20	759					
	(City/State and Zip Cod	e)	_			
For further informat	ion concerning this matter, p	lease call:		PS	2015 JAN	eranen-
Robin Hochen	doner	240 at (295-1623	유합	MAL	COLUMN CO
(N	lame of Person)		& Daytime Telephone Number)	SSEC.	12 PI	
Registration Division of Clifton Bui 2661 Exect	Corporations	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		STATE FLORIDA	H 1: 54	a penteram "Narrana"
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

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COLUMN TO SERVICE SERV
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Blacks, E

Filing Fee: \$25.00