

MO6000006668

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

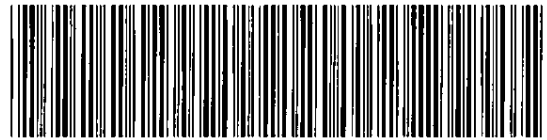
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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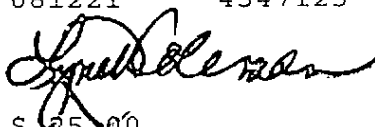
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Withdrawal*

OCT 23 2023

D CUSHING

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 081221 4347123  
AUTHORIZATION :   
COST LIMIT : \$ 25.00

ORDER DATE : October 19, 2023  
ORDER TIME : 9:06 AM  
ORDER NO. : 081221-050  
CUSTOMER NO: 4347123

FILED  
2024 OCT 20 AM 9:36  
TALLAHASSEE, FL  
CORPORATION SERVICE COMPANY

FOREIGN FILINGS

NAME: CLPF - FALCON PINES GP, LLC

\_\_\_\_ CORPORATE  
\_\_\_\_ LIMITED PARTNERSHIP  
XX\_\_\_\_ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XXX\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF STATUS

CONTACT PERSON: Eyliena Baker - EXT#

EXAMINER: \_\_\_\_\_

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

CLPF - Falcon Pines GP, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

12/01/2006

(Date registered with Florida Department of State)

M06000006668


(Florida Document Number)

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

Effective Date, if other than the date of filing: \_\_\_\_\_ (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.

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STATE OF FLORIDA  
CLERK OF THE COURT

  
(Signature of authorized representative)

John DeBeradinis

(Typed or printed name of signee)

**Filing Fee: \$25.00**