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## **COVER LETTER**

Division of	Corporations				
Cabot SUBJECT:	Oak Grove 12 LLC				
SUBJECT:	(Name of For	eign Limited Liability	Company)		
Dear Sir or Madam:					
The enclosed withdr	awal and fee(s) are submitte	d for filing.			
Please return all con	respondence concerning this	matter to the followin	g:		
David G. Martin					
	(Name of Person)		_		
Cabot Oak Grove L	LC12			21	
	(Firm/Company)		-	2019 APR 10	77
16751 Westfield La	ne			70	PILE PRO
	(Address)	-	_	P	
Huntington Beach,	California 92649			2: 2	
	(City/State and Zip Cod	le)	_	i i i i i i i i i i i i i i i i i i i	
For further information	ion concerning this matter, p	lease call:			
David G Martin		714 at (	840-9148		
(N	ame of Person)		& Daytime Telephone Number)		
Registration Division of Clifton Bui 2661 Exect	Corporations	Regi: Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, Florida 32314		
Enclosed is a check	for the following amount:				
\$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy		

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Cabot Oak Grove LLC12
(Name of limited liability company)
(Jurisdiction of its organization)
12/27/2006
(Date registered with Florida Department of State)
M06000007182
(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:
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)
(Signature of authorized representative)
David G Martin
(Typed or printed name of signee)

Filing Fee: \$25.00