

M07000001239

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

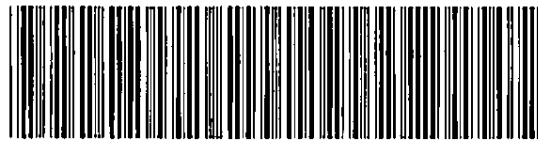
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

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700383084287

FILED

RECEIVED

2022 MAR 24 AM 8:45

2022 MAR 24 AM 11:35

SECRETARY OF STATE
TALLAHASSEE, FL
MAR 24 2022

Withdrawal

MAR 25 2022
I ALBRITTON

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

ACCOUNT NO. : I20000000195

REFERENCE : 568809 7950277

AUTHORIZATION :



COST LIMIT : \$ 25.00

ORDER DATE : March 23, 2022

ORDER TIME : 3:39 PM

ORDER NO. : 568809-005

CUSTOMER NO: 7950277

FOREIGN FILINGS

NAME: BOYD FLORIDA, LLC

____ CORPORATE
____ LIMITED PARTNERSHIP
XXX LIMITED LIABILITY COMPANY

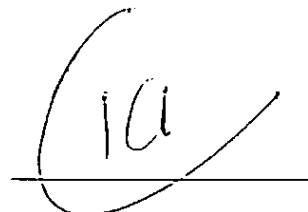
XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY
____ CERTIFICATE OF STATUS

CONTACT PERSON: Alexxis Weiland - EXT#

EXAMINER:



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Boyd Florida, 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:

Bonnie Bruce

(Name of Person)

Boyd Gaming Corporation

(Firm/Company)

6465 S. Rainbow Boulevard

(Address)

Las Vegas, NV 89118

(City/State and Zip Code)

For further information concerning this matter, please call:

Bonnie Bruce

702

696-1140

at (_____)

(Name of Person)

(Area Code & Daytime Telephone Number)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Boyd Florida, LLC

(Name of limited liability company)

Mississippi

(Jurisdiction of its organization)

March 1, 2007

(Date registered with Florida Department of State)

M07000001239

(Florida Document Number)

2022 MAR 24 AM 8:45
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FL

FILED

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.



(Signature of authorized representative)

Keith Smith, Manager

(Typed or printed name of signee)

Filing Fee: \$25.00