#N107000002919

•				
· (Requestor's Name)			
((Address)			
((Address)			
	(City/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
	(Business Entity Name)			
((Document Number)			
	0.07			
Сепіпеа Copies	Certificates of Status			
Special Instructions to Filing Officer:				
WRONG-	John			
U	Office Use Only			



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FILED

2015 JUL -8 PM 2: 04

SECRETARY OF STATE.

K. SALY EXAMINER JUL 1 0 2015



June 16, 2015

SUZANNE M LONG RE: TIC PARK CENTRE 19, LLC 1726 LEON RD. CULPEPER, VA 22701

SUBJECT: TIC PARK CENTRE 19, LLC

Ref. Number: M07000002919

We have received your document for TIC PARK CENTRE 19, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II

Letter Number: 815A00012560

COVER LETTER

I

TO:			Section Corporations			
SUBJE	CT:	TIC PARK CENTRE 19, LLC				
				reign Limited Liability	Company)	
Dear Sir	or Mad	dam:				
The encl	losed w	ithdra	wal and fee(s) are submitte	ed for filing.		
Please re	eturn al	corre	spondence concerning this	matter to the following	3 :	
Suzar	ne M	. Lor	ng			
			(Name of Person)		-	
TIC P	ARK (CEN	TRE 19, LLC			
			(Firm/Company)		-	
PO BO	OX 66	6				
			(Address)		-	
LEON	, VA 2	2272	5			
<u> </u>		_	(City/State and Zip Coo	de)	-	
For furth	ner info	rmatic	n concerning this matter, p	olease call:		
Suzanne M. Long		540 at (547-2537			
		(Na	ne of Person)		Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section		MAILING ADDRESS: Registration Section				
Division of Corporations		Division of Corporations				
Clifton Building		P.O. Box 6327				
			ive Center Circle Florida 32301	Tallah	assee, Florida 32314	
Enclosed	d is a cl	neck f	or the following amount:			
☑ \$25 F	iling Fe	e	□ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy	

FILED

2015 JUL -8 PM 2: 04

SLUNETARY OF STATE
FALLAHASSEE, FLORIDA

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

TIC PARK CENTRE 19, LLC
(Name of limited liability company)
DELAWARE
(Jurisdiction of its organization)
05/15/2007
(Date registered with Florida Department of State)
M0700002919
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
(Signature of authorized representative) Suzanne M. Long
(Typed or printed name of signee)

Filing Fee: \$25.00