M08000000781

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(Address)

(Address)

(City/State/Zip/Phone #)

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B. BOSTICK

APR 14 2014

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STARGATE1, 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:

Joel Anderson
(Name of Person)

(Firm/Company)

912 Drew St Suite 101
(Address)

Clearwater FL 33755
(City/State and Zip Code)

For further information concerning this matter, please call:

Joel Anderson at (727) 244-2544
(Name of Person) (An Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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

STARGATE 1, LLC
(Name of limited liability company)

NEVADA
(Jurisdiction of its organization)

JANUARY 22ND, 2008
(Date registered with Florida Department of State)

M08000000781
(Florida Document Number)

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

(Signature of authorized representative)

JOEL ANDERSON
(Typed or printed name of signee)

Filing Fee: $25.00