

M0800004797

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

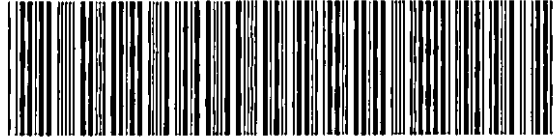
(Business Entity Name)

(Document Number)

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AND  
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2019 MAR 20 AM 8:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T.G.  
03/21/19

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

ACCOUNT NO. : I20000000195

REFERENCE : 690840 4301184

AUTHORIZATION :

COST LIMIT : \$25.00

*[Signature]*

ORDER DATE : March 19, 2019

ORDER TIME : 9:58 AM

ORDER NO. : 690840-010

CUSTOMER NO: 4301184

FOREIGN FILINGS

NAME: SUSHISAMBA.COM 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: Emily Croft - EXT# 62925

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

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AND  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

**SUSHISAMBA.COM LLC**

(Name of limited liability company)

**DELAWARE**

(Jurisdiction of its organization)

**OCTOBER 30, 2008**

(Date registered with Florida Department of State)

**M08000004797**

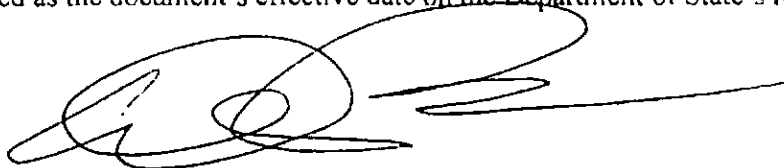
(Florida Document Number)

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.



(Signature of authorized representative)

**Danielle Billera**

(Typed or printed name of signee)

**Filing Fee: \$25.00**

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