MBDD5371

(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:	
Office Use Only	



100326957681

28.19 JUN - 4 A 3 11

19 JUN-4 FB 4: 12

D SCOTT

JUN - 5 2019

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 790926 4360443

AUTHORIZATION

ORDER DATE: June 4, 2019

ORDER TIME : 2:14 PM

ORDER NO. : 790926-030

CUSTOMER NO: 4360443

FOREIGN FILINGS

NAME:

BRIXMOR RESIDUAL BROOKSVILLE

SQUARE, LLC

_ CORPORATE

LIMITED PARTNERSHIP

XX 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: Roxanne Turner - EXT#

EXAMINER:

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Brixm	or Residual Brooksville Square, LLC		
(Nam	e of limited liability company)		
	Delaware		
(Ju	isdiction of its organization)		
	12/11/2008		
(Date registe	red with Florida Department of State)	:	
	M08000005371	-	
(F	lorida Document Number)		I - II
This limited liability company is with	 drawing its certificate of authority in this stat 		>
Effective Date, if other than the date	of filing:	(option	nal)
(If an effective date is listed, the date more than 90 days after filing.)	must be specific and cannot be prior to date of	of filing	or
Note: If the date inserted in this block	does not meet the applicable statutory filing	require	ements,
this date will not be listed as the doct	ment's effective date on the Department of S	tate's r	ecords.
Steve	Sicgel, EVP		
(Ty	ped or printed name of signce)		

Filing Fee: \$25.00