1/6/2017

Division of Corporations

## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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## LLC DISSOLUTION OR WITHDRAWAL

CVS 3249 FL, L.L.C.

Certificate of Status	0
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Corporate Filing Menu

**S** Warren

JAN 09 2017

## **COVER LETTER**

Division of	Section Corporations		
SUBJECT:	249 FL, L.L.C.		
SUBJECT:	(Name of For	eign Limited Liabil	ity Company)
Dear Sir or Madam:			
The enclosed withdre	awal and fee(s) are submitte	d for filing.	
Please return all corr	espondence concerning this	matter to the follow	ving:
Amanda Jackson			
	(Name of Person)		<del></del>
CT Corporation Sys	tem		
	(Firm/Company)		
155 Federal Street, 5	Suite 700		
	(Address)	······································	
Boston, MA 02110			
	(City/State and Zip Cod	(c)	
For further informati	on concerning this matter, p	lease call:	
Amanda Jackson		617 at (	531-5830
(N	ame of Person)		de & Daytime Telephone Number)
Registration Division of Clifton Buil 2661 Execu	Corporations	Re Di P.0	AILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 Illahassee, Florida 32314
Enclosed is a check	for the following amount:  \$\simega\$ \$30 Filing Fee & Certificate of Status	\$55 Filing Fee Certified Copy	<del>-</del>

MOV

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

CVS 3249 FL, L.L.C.	
(Name of limited liability company)	
Delaware	
(Jurisdiction of its organization)	
03/04/2009	
(Date registered with Florida Department of State)	
A0900000880	
(Florida Document Number)	
This limited liability company is withdrawing its certificate of authority in this state.  (Signature of authorized representative)  Melanie K. Luker, Secretary	
(Typed or printed name of signee)	

Filing Fee: \$25.00