## MOPOCECOILLEY

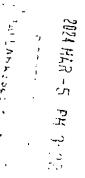
	(Requestor's Name)	
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Special Instructions to	Filing Officer:	

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SSEEL FLE



23, , , , , , ,

A. HUNT

0.3/05/24

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 284739 8346375

AUTHORIZATION :

COST LIMIT : \$ 25.0

ORDER DATE : January 24, 2024

ORDER TIME : 2:38 PM

ORDER NO. : 284738-195

CUSTOMER NO: 8346375

## FOREIGN FILINGS

NAME: SKIP PROS, 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: Shauna Godbolt - EXT#

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Skip Pros, LLC		
	(Name of limited liability company)	
Delaware		69
-···	(Jurisdiction of its organization)	2003 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
05/04/2009		
	(Date registered with Florida Department of State)	57. Ú1 ·
M0900000166	4	AHIO: 34
-	(Florida Document Number)	E. ST
		끈걸 쓸
This limited li	ability company is withdrawing its certificate of authority in the	his state.
Effective Date	e, if other than the date of filing:	(optional)
(If an effective more than 90	e date is listed, the date must be specific and cannot be prior to days after filing.)	date of filing or
Note: If the d	ate 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 Departmen	nt of State's records.
	Genrifer Tunage (Signature of authorized representative)	<del> </del>
	Jennifer Turnage	
	(Typed or printed name of signee)	

Filing Fee: \$25.00