

M09000004740

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

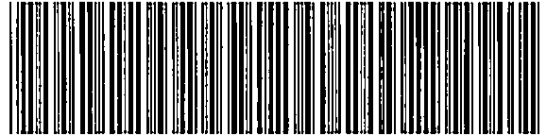
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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J. J. EGGETT
JUN 01 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 18, 2018

ASHLEY BRYSON
79 WOODFIN PLACE, STE 300
ASHEVILLE, NC 28801 US

SUBJECT: AVENTINE FL ONE, LLC
Ref. Number: M09000004740

We have received your document for AVENTINE FL ONE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Judy A Leggett
Regulatory Specialist II
Registration Section

Letter Number: 018A00007879



RECEIVED
2018 JUN -4 AM 10:50
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Aventine FL One, 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:

Ashley Bryson

(Name of Person)

Johnson Price Sprinkle PA

(Firm/Company)

79 Woodfin Place, Suite 300

(Address)

Asheville, NC 28801

(City/State and Zip Code)

For further information concerning this matter, please call:

Ashley Bryson

(Name of Person)

828

at ()

254-2374

(Area 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

Aventine FL One, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

12/04/09

(Date registered with Florida Department of State)

M09000004740

(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)

W. LEW ELLISTON

(Typed or printed name of signee)

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Filing Fee: \$25.00