MICCOOLIS

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		





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D. SCOTT

DEC 9 2016



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 10, 2016

GLENIS WEBB 2001 NW 107TH AVE 3RD FLOOR MIAMI, FL 33172

SUBJECT: WHETSTONE PARTNERS, LLC

Ref. Number: M1000000275



We have received your document for WHETSTONE PARTNERS, LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

The form you submitted is for a FL LLC, but your entity is a FOREIGN LLC. Please complete and return the enclosed blank form(s).

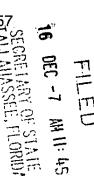
We are enclosing the proper form(s) with instructions for your convenience.

Please return 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.

Dionne M Scott Regulatory Specialist II

Letter Number: 116A00024257



COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Whetstone Forthers (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:	
Glenis Webb (Name of Person)	
Whetstone Holdings, LLC (Firm/Company)	16 DEC -7
2001 NW 107th Ave, 3rd Floor (Address)	PE STATE
Miami FL 33172 (City/State and Zip Code)	0
For further information concerning this matter, please call:	
Glenis Webb at (305) 434-4100 (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 & □ \$55 Filing Fee & Certificate of Status Certified Copy Certified Copy	

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

(Name of limited liability company)	
Delaware	
(Jurisdiction of its organization)	
(Date registered with Florida Department of State)	····
NA INDIANA POTE	
(Florida Document Number)	
This limited liability company is withdrawing its certificate of authority in this state.	
1617111111	
(Signature of authorized representative)	
Scott a Goodrett	NECK SECTION
(Typed or printed name of signee)	類問門
	SSE -1
	SI E

Filing Fee: \$25.00