

MI0000001360

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

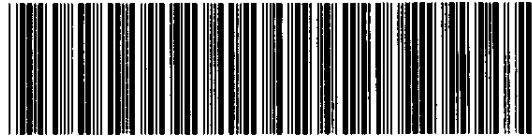
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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RECEIVED  
OFF. JUDGE  
16 DEC 27 AM 10:51

FILED

2016 DEC 27 A 9:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

S Warren  
DEC 28 2016

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 437268 7736440  
AUTHORIZATION :   
COST LIMIT : \$ 25.00

ORDER DATE : December 23, 2016  
ORDER TIME : 9:22 AM  
ORDER NO. : 437268-015  
CUSTOMER NO: 7736440

FOREIGN FILINGS

NAME: SASOF TR-05, LLC

☐ CORPORATE  
☐ LIMITED PARTNERSHIP  
☒ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY  
☒ PLAIN STAMPED COPY  
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Melissa Zender - EXT#

EXAMINER: \_\_\_\_\_

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SASOF TR-05, 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:

Lisa Baptiste  
\_\_\_\_\_

(Name of Person)

Apollo Aviation Group, LLC  
\_\_\_\_\_

(Firm/Company)

848 Brickell Avenue, Suite 500  
\_\_\_\_\_

(Address)

Miami, FL 33131  
\_\_\_\_\_

(City/State and Zip Code)

For further information concerning this matter, please call:

Lisa Baptiste  
\_\_\_\_\_

(Name of Person)

at ( 786 ) 476-2383  
\_\_\_\_\_  
(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

SASOF TR-05, LLC

(Name of limited liability company)

DELAWARE

(Jurisdiction of its organization)

24 MARCH 2010

(Date registered with Florida Department of State)

M10000001360

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.



(Signature of authorized representative)

Robert G. Korn

(Typed or printed name of signee)

Filing Fee: \$25.00

FILED  
2010 FEB 27 A 9:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA