MID 00000 1394

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





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2021 JUN 29 PK 2:

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June 9, 2021

DEAN PEDERSEN 19477 W PEDERSEN DR S ANTIOCH, IL 60002

SUBJECT: ABA ENTERPRISES - KEY WEST, LLC

Ref. Number: M10000001394

We have received your document for ABA ENTERPRISES - KEY WEST, 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):

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

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) 245-6050.

Letter Number: 621A00012589

Octavia L Simmons
Regulatory Specialist II Supervisor

www.sunbiz.org

COVER LETTER

TO: Registration Division of	n Section Corporations		
SUBJECT:	ABA ENTERA	PLISES - KE	WEST LLC Company)
	(Mine Wille	eign isminet isminity	company)
Dear Sir or Madam:			
The enclosed withdr	awal and fee(s) are submitte	d for filing.	
Please return all corr	respondence concerning this	matter to the followin	g:
De	(Name of Person)	EN	_
	(Firm/Company)		_
194	(Address) WTIOCH IL (City/State and Zip Cod	ERSEN DR	<u> </u>
A	NTIOCH IL (City/State and Zip Cod	60002	_
For further informati	on concerning this matter, p	olease call:	
DEAN	PEDEKSEN ame of Person)	at (<u>847</u> (Area Code d	Daytime Telephone Number)
Division of P.O. Box	on Section of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
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

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NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

ABA ENTERPRISES - KEY WEST LLC (Name of limited liability company)
(Name of limited liability company)
(Jurisdiction of its organization)
(Date registered with Florida Department of State)
(Date registered with Florida Department of State)
M1000001394 (Florida Document Number)
(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: 2/1/202/ (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)
DEAN PEDEKSEN (Typed or printed name of signee)

Filing Fee: \$25.00