

12/7/2016

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (614)280-3338  
Fax Number : (954)208-0845

LLC DISSOLUTION OR WITHDRAWAL  
SSTI 4950 N DIXIE HWY, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

RECEIVED

2016 DEC -7 AM 10:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED  
16 DEC -7 AM 9:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Corporate Filing Menu

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D. SCOTT

DEC 8 2016

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SSTI 4950 N DIXIE HWY, 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:

MEGAN PIDDUCK  
(Name of Person)

EXTRA SPACE STORAGE INC.  
(Firm/Company)

2795 E COTTONWOOD PKWY STE 400  
(Address)

SALT LAKE CITY, UT 84121  
(City/State and Zip Code)

For further information concerning this matter, please call:

DAVID L. RASMUSSEN at 801 365-4473  
(Name of Person) (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

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### NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

SSTI 4950 N DIXIE HWY, LLC

(Name of limited liability company)

DELAWARE

(Jurisdiction of its organization)

3/29/2010

(Date registered with Florida Department of State)

M10000001457

(Florida Document Number)

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



(Signature of authorized representative)

DAVID L. RASMUSSEN

(Typed or printed name of signee)

Filing Fee: \$25.00

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