

MID0000001555

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

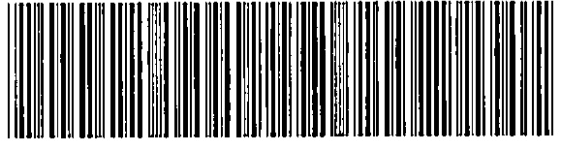
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400322688374

SECRETARY OF STATE
TALLAHASSEE, FL

2019 JAN -7 AM 11:07 JAN -7 PM 4:31

FILED

RECEIVED

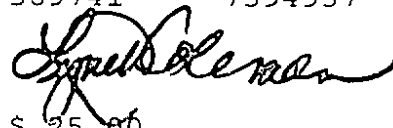
EX-2
S. PRATHI

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

ACCOUNT NO. : I20000000195

REFERENCE : 569741 7594937

AUTHORIZATION :



COST LIMIT : \$ 25.00

ORDER DATE : January 7, 2019

ORDER TIME : 12:12 PM

ORDER NO. : 569741-005

CUSTOMER NO: 7594937

FOREIGN FILINGS

NAME: HIGH PLAINS ACQUISITION, LLC

____ CORPORATE
____ LIMITED PARTNERSHIP
XX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY
____ CERTIFICATE OF STATUS

CONTACT PERSON: Roxanne Turner - EXT#

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HIGH PLAINS ACQUISITION, 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:

SAMANTHA BURTON

(Name of Person)

PERELLA WEINBERG PARTNERS CAPITAL MANAGEMENT L

(Firm/Company)

767 FIFTH AVENUE

(Address)

NEW YORK, NY, 10153

(City/State and Zip Code)

For further information concerning this matter, please call:

SAMANTHA BURTON

(Name of Person)

at 646 680-8124

(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

HIGH PLAINS ACQUISITION, LLC

(Name of limited liability company)

DELAWARE

(Jurisdiction of its organization)

04/02/2010

(Date registered with Florida Department of State)

M10000001555

(Florida Document Number)

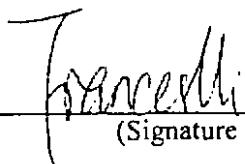
FILED
2019 JAN -7 AM 11:07
TALLAHASSEE, FL
FLORIDA DEPARTMENT OF STATE

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)

Frances Ni, Authorized Person

(Typed or printed name of signee)

Filing Fee: \$25.00