

M10000003358

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

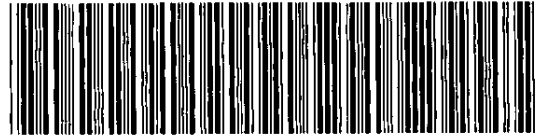
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
14 JUL 31 PM 1:45
TALLAHASSEE, FLORIDA
DEPARTMENT OF STATE

RECEIVED
14 JUL 31 PM 4:19
TALLAHASSEE, FLORIDA
DEPARTMENT OF STATE

AUG - 7 2014

T. BROWN



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 239211 4321791

AUTHORIZATION

COST LIMIT \$25.00

ORDER DATE : July 31, 2014

ORDER TIME : 1:44 PM

ORDER NO. : 239211-010

CUSTOMER NO: 4321791

FOREIGN FILINGS

NAME: OASIS ASSOCIATES 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: Courtney Williams - EXT# 62925

EXAMINER: _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 1, 2014

CSC
COURTNEY WILLIAMS
TALLAHASSEE, FL

SUBJECT: OASIS FL ASSOCIATES LLC
Ref. Number: M10000003358

RESUBMIT
Please give original
submission date as file date.

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

The current name of the entity is as referenced above. Please correct your document accordingly.

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.

Teresa Brown
Regulatory Specialist II

Letter Number: 714A00016485

RECEIVED
DEPARTMENT OF STATE
14 AUG - 5 AM 10: 47

FILED
14 JUL 31 PM 1:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Oasis FL Associates LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

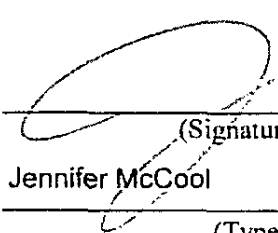
July, 29, 2010

(Date registered with Florida Department of State)

M10000003358

(Florida Document Number)

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



(Signature of authorized representative)

Jennifer McCool

(Typed or printed name of signee)

Filing Fee: \$25.00