

MI 0000005564

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

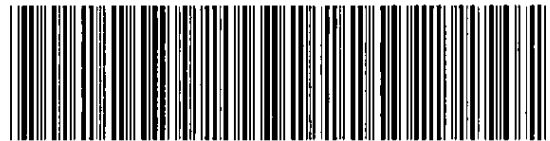
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



400417270704

FILED

2023 NOV -9 AM 11: 22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

2023 NOV -9 PM 12: 14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

ACCOUNT NO. : I20000000195

REFERENCE : 122412 7143029

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : November 8, 2023

ORDER TIME : 7:40 AM

ORDER NO. : 122412-025

CUSTOMER NO: 7143029

FOREIGN FILINGS

NAME: DUKE ATLANTIC BUSINESS CTR  
LAND, 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: Alexxis Weiland-sorenson - EXT#

TO: Registration Section  
Division of Corporations

**SUBJECT:** \_\_\_\_\_  
(Name of Foreign Limited Liability Company)

Please return all correspondence concerning this matter to the following:

(Name of Person)

(Firm/Company)

(Address)

(City/State and Zip Code)

(Name of Person)

\_\_\_\_\_) \_\_\_\_\_  
(Area Code & Daytime Telephone Number)

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

### ■ \$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

Duke Atlantic Business Ctr Land, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

12/16/2010

(Date registered with Florida Department of State)

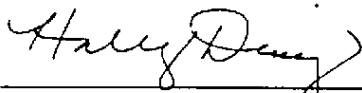
M10000005564

(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: \_\_\_\_\_ (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)

Holly Doering

(Typed or printed name of signee)

FILED  
2023 NOV -9 AM 11:22  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00