## M/000005785

(Requestor's Name)
(Address)
(Address)
(Audiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Storiton 2 may 1 strong)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:

Office Use Only



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A RAMSEY APR 2 8 2022 CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 640757 7809601
AUTHORIZATION: Line Ble man
COST LIMIT : (\$ 25.00
ORDER DATE : April 26, 2022
ORDER TIME : 4:59 PM
ORDER NO. : 640757-015
CUSTOMER NO: 7809601
FOREIGN FILINGS
NAME: SOUTH FLORIDA FINANCIAL SERVICES, LLC
CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY
XXXX WITHDRAWAL/CANCELLATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF STATUS

EXAMINER:

CONTACT PERSON: Eyliena Baker - EXT#

## **COVER LETTER**

TO:

Registration Section

Division of	f Corporations		
SUBJECT: South	h Florida Financial Services.	LLC	
30b3LC1		reign Limited Liability	(Company)
Dear Sir or Madam:			
The enclosed withdr	rawal and fee(s) are submitte	ed for filing.	
Please return all cor	respondence concerning this	matter to the following	g:
Tracy Talbot			
	(Name of Person)		_
Holman Automotive	e Group, Inc.		
	(Firm/Company)		_
4001 Leadenhall Ro	oad		
	(Address)		_
Mt. Laurel, NJ 080			_
	(City/State and Zip Coo	ie)	
For further informat	ion concerning this matter, p	olease call:	
Tracy Talbot		at ( <u>856</u>	_)778-1500
(N	ame of Person)	(Area Code a	& Daytime Telephone Number)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee. FL 32314			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

FILED

2022 APR 27 AM IO: 37

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

South Florida Financial Services, LLC
(Name of limited liability company)
Dalarrana
Delaware
(Jurisdiction of its organization)
12/29/2010
(Date registered with Florida Department of State)
M10000005785
(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:
(Signature of authorized representative)  Katherine A. Mullin
(Typed or printed name of signee)

Filing Fee: \$25.00