## M110000000693

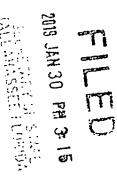
(Requestor's Name)	
(Address)	
(Address)	_
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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O. BRUCE FEB 07 2019

## **COVER LETTER**

TO: Registratio Division of	n Section Corporations					
MAG:	NOLIA PROPERTIES L.L.C.					
SUBJECT.	(Name of Fore	ign Limited Liabili	ty Company)		-	
Dear Sir or Madam:						
The enclosed withdo	rawal and fee(s) are submitted	for filing.				
Please return all cor	respondence concerning this r	natter to the followi	ng:			
CHRISTY WHITE						
	(Name of Person)	<del>-                                    </del>				
ADMINISTRATIV	E SYSTEMS INC					
	(Firm/Company)		<del></del>			
P O BOX 6016						
	(Address)		<del></del>			
RIDGELAND MS	39158			<b>∑</b>	20	
	(City/State and Zip Code	)	<del></del>		2019 JAN	<del></del>
For further informat	ion concerning this matter, plo	ease call:		1385 1777 1777 1777 1777 1777 1777 1777 17	30	Parts Contract
CHRISTY WHITE		601	709-1408 EXT 237		EEG SEG	17
(1)	ame of Person)	(Area Code	: & Daytime Telephone Number)	RIDA	<u>6</u>	٠,
Registratio Division of Clifton Bui 2661 Exect	Corporations	Reg Div P.O	distration Section ision of Corporations Box 6327 lahassee, Florida 32314			
Enclosed is a check	for the following amount:					
□ \$25 Filing Fee	☐ \$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	S60 Filing Fee, Certificate of Status & Certified Copy	:		

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

MAGNOLIA PROPERTIES L.L.C.
(Name of limited liability company)
FOREIGN
(Jurisdiction of its organization)
2/10/2011
(Date registered with Florida Department of State)
M11000000693
(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: 1/1/2019 (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.
SSE CONTRACTOR OF THE PROPERTY
Elton D. Bed S.
(Signature of authorized representative)
ELTON G BEEBE SR.
(Typed or printed name of signee)

Filing Fee: \$25.00