(Requestor's Name)	
(Address)	500395589
(City/State/Zip/Phone #)	LLC With
PICK-UP WAIT MAIL (Business Entity Name)	ÄC
(Document Number)	TORIDA
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
	A. RAMSEY

Office Use Only



085

2022 OCT -- 7 AM ||: 15

.}

OCT 1 0 2022

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

EXAMINER:

CONTACT PERSON: Eyliena Baker - EXT#

COVER LETTER

	of Corporations		
Min SUBJECT:	nesota Limited, LLC		
SUBJECT.	(Name of Fo	oreign Limited Liability	Company)
Dear Sir or Mada	m:		
The enclosed witi	ndrawal and fee(s) are submitt	ed for filing.	
Please return all c	orrespondence concerning thi	s matter to the followin	g:
Virginia Eden, f	Paralegal		
	(Name of Person)		_
Artera Services	. LLC		
	(Firm/Company)		_
3100 Interstate	North Circle, Suite 300		
	(Address)	•	_
Atlanta, GA 303	339		
	(City/State and Zip Co	de)	_
For further inform	nation concerning this matter.	please call:	
Virginia Eden		404 at (791-4193
	(Name of Person)		& Daytime Telephone Number)
Registr Divisio P.O. Bo	Address: ation Section n of Corporations ox 6327 ssee, 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 che	ck 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 OCT -7 AM 10: 04

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Minnesota Limited, LLC
(Name of limited liability company)
Minnesota
(Jurisdiction of its organization)
6/28/2011
(Date registered with Florida Department of State)
M11000003286
(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:
Melanie M. Malis
Melanie M. Nealis
(Typed or printed name of signee)

Filing Fee: \$25.00