M1100000 4330

(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:

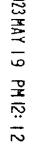
Office Use Only

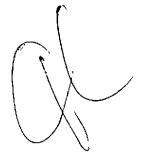


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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 9, 2023

ARTHUR HOWARD 1551 BREAKERS WEST BLVD WEST PALM BEACH, FL 33411

SUBJECT: HOWARD REAL PROPERTY INVESTMENTS, LLC

Ref. Number: M11000004330

We have received your document for HOWARD REAL PROPERTY INVESTMENTS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA LLC, but your entity is a FOREIGN LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days o your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please callo (850) 245-6050.

Tammi Cline Regulatory Specialist II Supervisor

Letter Number: 123A000105193



COVER LETTER

	ration Section on of Corporations			
SUBJECT:	HOVMAD REAL (Name of For	PRO SERTY Cign Limited Liability	INVESTMENTS Company)	ilc
Dear Sir or Mac	dam:			
The enclosed w	ithdrawal and fee(s) are submitte	d for filing.		
Please return all	l correspondence concerning this	matter to the followin	ā:	
_ART	Hug How ARD (Name of Person)		_	
_Hew) KD	(Firm/Company)	NVESTER	-ULi	2023 h
1551	BREAKERS WE (Address)	ST BLVD	_	2023 HAY 19 PH 12: 12
WEST	FALM BEACH, (City/State and Zip Cod	FL 3341	Ω	HI2: 12
For further info	rmation concerning this matter, p	dease call:		1.1
ARTHUR	Heward (Name of Person)	at (769 - 7203 K Daytime Telephone Number)	<u></u>
Regis Divis P.O.	ng Address: stration Section ion of Corporations Box 6327 hassee, FL 32314		Street Address: Registration Section Division of Corporation The Centre of Tallahass 2415 N. Monroe Street, Tallahassee, FL 32303	sec
Enclosed is a c	heck for the following amount:			
□\$25 Filing F	ee □ \$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

	KLAU /KOPEK/Y /NIE	=STMENI> LLC-
	REAL PROPERTY INVESTIGATION (Name of limited liability com	ipany)
	(Jurisdiction of its organizat	ion)
2011		
	(Date registered with Florida Departi	nent of State)
	m // 00 00 60 4330 (Florida Document Number	
	(Florida Document Numbe	er)
This limited liabi	ility company is withdrawing its certificate	of authority in this state.
more than 90 day		
	be listed as the document's effective date of	olicable statutory filing requirements, on the Department of State's records.
		on the Department of State's records.

Filing Fee: \$25.00