

11100004586

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

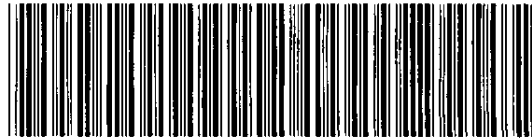
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2017 JUN -1 P 3:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

2017 JUN -1 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
JUN 02 2017

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

ACCOUNT NO. : I20000000195

REFERENCE : 666260 5033774

AUTHORIZATION

COST LIMIT : \$ 25.00

ORDER DATE : June 1, 2017

ORDER TIME : 3:01 PM

ORDER NO. : 666260-005

CUSTOMER NO: 5033774

FOREIGN FILINGS

NAME: EMMETROPE OPHTHALMICS, 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: Melissa Zender - EXT#

EXAMINER: _____

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Emmetrop Ophthalmics, LLC
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fec(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Steven Leischner
(Name of Person)

Holding Capital Group, Inc.
(Firm/Company)

104 West 40th Street, 19th Floor
(Address)

New York, NY 10018
(City/State and Zip Code)

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For further information concerning this matter, please call:

Steven Leischner at (212) 486-6670 x 206
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

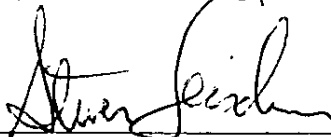
Emmetropia Ophthalmics, LLC
(Name of limited liability company)

Delaware
(Jurisdiction of its organization)

September 13, 2011
(Date registered with Florida Department of State)

M11000004586
(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.


(Signature of authorized representative)

Steven Leischner
(Typed or printed name of signee)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Filing Fee: \$25.00