

M12000003310

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

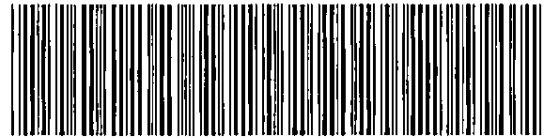
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800337787728

FILED

2019 DEC 10 PM 12:03

DEPARTMENT OF REVENUE  
TALLAHASSEE, FLORIDA

19 DEC 10 PM 12:15

K. SALY  
DEC 11 2019

**FLORIDA FILING & SEARCH SERVICES, INC.**

**P.O. BOX 10662 TALLAHASSEE, FL 32302**

**155 Office Plaza Dr Ste A Tallahassee FL 32301**

**PHONE: (800) 435-9371; FAX: (866) 860-8395**

---

**DATE: 12/10/19**

**NAME: STAG ORLANDO, LLC**

**TYPE OF FILING: WITHDRAWAL**

**COST: 25.00**

**RETURN: PLAIN COPY PLEASE**

---

**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**



## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

STAG Orlando, LLC  
\_\_\_\_\_  
(Name of limited liability company)

Delaware  
\_\_\_\_\_  
(Jurisdiction of its organization)

6/12/2012  
\_\_\_\_\_  
(Date registered with Florida Department of State)

M12000003310  
\_\_\_\_\_  
(Florida Document Number)

FILED  
2018 DEC 10 PM 12:03  
ALAN H. SIMMONS  
FLORIDA SECRETARY OF STATE

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

Effective Date, if other than the date of filing: \_\_\_\_\_ (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.

/s/ Alan H. Simmons  
\_\_\_\_\_  
(Signature of authorized representative)

Alan H. Simmons  
\_\_\_\_\_  
(Typed or printed name of signee)

**Filing Fee: \$25.00**