M12000003668

(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:
'
\w 12 k.
1/2 ' '

Office Use Only



900258783739

04/09/14--01011--020 **25.00

14 APR -9 PH L: 33
SECRETARY OF STATE

T. Busch APR 1-1 2014



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Sickler Enterprises LLC (Name of Foreign Limited Liability Company)
Dear Sir or Madam:
The enclosed withdrawal and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
James Sickler (Name of Person)
Sickler Enterprises LLC (Firm/Company)
800 Tartan Way (Address)
Enterprise At 36330 (City/State and Zip Code)
For further information concerning this matter, please call:
James Sickler at (334) 393-3113 (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 \$ \$55 Filing Fee \$ Certificate of Status Certified Copy Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Sigkler Enterprises LLC (Name of limited liability company)			
(Name of limited liability company)	TA'S		
AL.	ECRE	14 APR	
(Jurisdiction of its organization)	ASS.	 -9	- areas
6/28/12		₽	ij rpagese F
(Date registered with Florida Department of State)	FLC	F.	(TORRIGHE)
M12000003668)RIS	կ։ 33	- Carrer
(Florida Document Number)			
This limited liability company is withdrawing its certificate of authority in this st	tate.		
4			
James Sinhler			
(Signature of authorized representative)	_		

Filing Fee: \$25.00

TAMES SickLER
(Typed or printed name of signee)