

M12 0000 64047

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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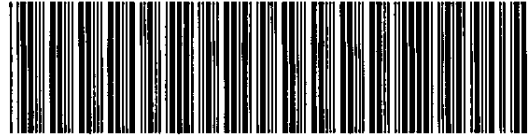
(Business Entity Name)

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

APR 16 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Van Ritel Associates 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:

Wm V. Ritel

(Name of Person)

Van Ritel Associates LLC M1200000 4047

(Firm/Company)

5912 90th Ave Circle E

(Address)

Parrish FL 34219

(City/State and Zip Code)

For further information concerning this matter, please call:

Van Ritel

(Name of Person)

at (941) 531-4006

(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

Van Ritel Associates LLC

(Name of limited liability company)

(Jurisdiction of its organization)

June 2012

(Date registered with Florida Department of State)

M 12000004047

(Florida Document Number)

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

William V. Ritel

(Signature of authorized representative)

William Van Ritel

(Typed or printed name of signee)

RECEIVED
MAR 26 2012
15 MAR 26 AM 9:19
STATE OF FLORIDA
DEPARTMENT OF STATE

Filing Fee: \$25.00