## M13000002225

(Requesto	or's Name)	
(Address)		
(Address)		
(City/State	e/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Business	Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		

Office Use Only



100312703731

2018 NAY -9 33 11: 01



O SIMMONS MAY 1 0 2018 CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

Į

ACCOUNT NO. : 12000000195

REFERENCE: 199204 4325457

AUTHORIZATION : STRUBBLE PLAN

COST LIMIT : \$ 25.00

ORDER DATE: May 8, 2018

ORDER TIME : 5:46 PM

ORDER NO. : 199204-080

CUSTOMER NO: 4325457

## FOREIGN FILINGS

NAME: S G HOMES IVA LLC

CORPORATE

LIMITED PARTNERSHIP

XX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF STATUS

CONTACT PERSON: Roxanne Turner - EXT#

EXAMINER:

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

S G HOMES IV	/A LLC	
	(Name of limited liability company)	
DELAWARE		
	(Jurisdiction of its organization)	M
04/08/2013		対法量で
	(Date registered with Florida Department of State)	7 9
M13000002225		
***************************************	(Florida Document Number)	in the second se
(If an effective more than 90 Note: If the d	e, if other than the date of filing:  e date is listed, the date must be specific and cannot be prior to d days after filing.)  ate inserted in this block does not meet the applicable statutory finot be listed as the document's effective date on the Department	ling requirements,
	(Signature of authorized representative)	
	Mikko Syrjanen AUTHORIZED PERSON	
	(Typed or printed name of signee)	<del></del>

Filing Fee: \$25.00