(Re	equestor's Name)
(A	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(B	usiness Entity Name)
(D	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:

Office Use Only



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D. BRUCE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Mame 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:
Coroly Jaussy (Name of Person)
Divion Hughes Goodman UP
525 East Day Street, Suite 100, Charleton, S.C. 29403 (City/State and Zip Code)
For further information concerning this matter, please call: (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 \$\Bigcup \$30 Filing Fee &\Bigcup \$55 Filing Fee &\Bigcup \$60 Filing Fee, Certificate of Status & Certified Conv

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Maverick Golf Designs LLC
(Name of limited liability company)
(Jurisdiction of its organization) 2013
(Date registered with Florida Department of State)
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
Siboo Pazlar
(Signature of authorized representative)
_t)phorah tezler
(Typed or printed name of signee)

Filing Fee: \$25.00