

113000002999

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

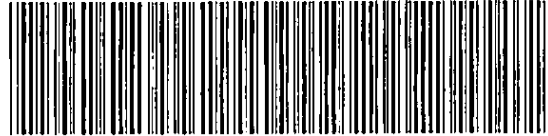
(Business Entity Name)

(Document Number)

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18 MAR 23 AM 7:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2018 MAR 23 AM 10:46

CLERK OF COURT

K. SALY

MAR 20 2018

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 129323 7500544

AUTHORIZATION :



COST LIMIT : \$ 25.00

ORDER DATE : March 22, 2018

ORDER TIME : 9:0 AM

ORDER NO. : 129323-005

CUSTOMER NO: 7500544

FOREIGN FILINGS

NAME: ELP WEST PALM, LLC

☐ CORPORATE  
☐ LIMITED PARTNERSHIP  
☒ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY  
☒ PLAIN STAMPED COPY  
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Roxanne Turner - EXT#

EXAMINER: \_\_\_\_\_

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

ELP WEST PALM, LLC  
\_\_\_\_\_  
(Name of limited liability company)

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

MAY 10, 2013  
\_\_\_\_\_  
(Date registered with Florida Department of State)

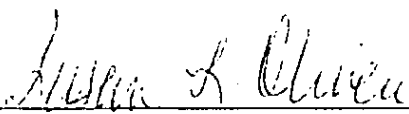
MI3000002999  
\_\_\_\_\_  
(Florida Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

  
\_\_\_\_\_  
(Signature of authorized representative)

SUSAN L. OLIVERI  
\_\_\_\_\_  
(Typed or printed name of signer)

**Filing Fee: \$25.00**