M1300004272

(Requestor's Name) -
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
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04/04/16--01015--016 **25.00



4K/1605

HOLDEN LAW OFFICE, P.C.

NATALIE D. RILEY natalie@holdenlawoffices.com

ASHLEY M. MAYER ashley@holdenlawoffices.com

TYLER R. RAMSEY tyler@holdenlawoffices.com 718 WEST BUSINESS HIGHWAY 60 P. O. BOX 633 DEXTER, MISSOURI 63841

TELEPHONE: (573) 624-8901 FAX: (573) 624-8188

March 29, 2016

Registration Section Division of Corporations PO Box 6327 Tallahassee, Florida 32314

RE: High Pointe WM, LLC

Dear Sir/Madam:

Enclosed please find one original Notice of Withdrawal of Certificate of Authority for High Pointe WM, LLC. Also enclosed is a check payment in the amount of \$25.00 representing the filing fee for this transaction.

If you have any questions regarding this matter, please contact my office.

Sincerely

NDR/kl

enclosures



COVER LETTER

TO: • Registration Section Division of Corporations

High Pointe WM, LLC

SUBJECT:

(Name of Foreign Limited Liability Company)

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Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Natalie D. Riley

(Name of Person)

Holden Law Office, P.C.

(Firm/Company)

718 W Bus Hwy 60/ PO Box 633

(Address)

Dexter, MO 63841

(City/State and Zip Code)

For further information concerning this matter, please call:

Natalie D. Riley	573 at (_् 624-8901	
(Name of Person)	(Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS:	M	AILING ADDRESS:	
Registration Section	Registration Section		
Division of Corporations	Di	Division of Corporations	
Clifton Building	P.O. Box 6327		
2661 Executive Center Circle	Ta	llahassee, Florida 32314	
Tallahassee, Florida 32301			
Enclosed is a check for the following amount:			
	_		



NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

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High Pointe WM, LLC
(Name of limited liability company)
Missouri
(Jurisdiction of its organization)
07-05-13
(Date registered with Florida Department of State)
M13000004272
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.

(Signature of authorized representative) Matt Mills / Manager	TALLAHAS
(Typed or printed name of signee)	-4 M 9 43 RY OF STATE ISEE, FLORDA

Filing Fee: \$25.00