M13000005405

| (Re | equestor's Name) | | | |
|---|--------------------|-------------|--|--|
| (Ac | ddress) | | | |
| (Ac | idress) | | | |
| (Ci | ty/State/Zip/Phone | e #) | | |
| PICK-UP | MAIT | MAIL | | |
| (Bi | usiness Entity Nan | ne) | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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COVER LETTER

| | on Section of Corporations | | | | | |
|--|--|------------------------------------|--|-------------|---------|-----------|
| Paeou SUBJECT: | nia, LLC | • | | | | |
| | (Name of Fo | oreign Limited Liability | (Company) | | | |
| Dear Sir or Madam | : | | | | | |
| The enclosed withd | rawal and fee(s) are submitt | ed for filing. | | | | |
| Please return all co | rrespondence concerning thi | s matter to the following | g: | | | |
| Tracy Desautels | | | | | | |
| | (Name of Person) | | - | | | |
| Inland Managemer | nt Corporation | | | | | |
| | (Firm/Company) | | _ | | | |
| 665 Simonds Road | | | | | | |
| | (Address) | | - | | | |
| Williamstown, MA | 01267 | | | ∑. E | 2019 | |
| | (City/State and Zip Cod | de) | _ | | JAN | <u> </u> |
| For further informat | ion concerning this matter, p | olease call: | | 735E | 29 | 1 |
| Tracy Desautels | | 413 | 458-4534 | | 골 4 | g s |
| 4) | lame of Person) | (Area Code & | k Daytime Telephone Number) | | <u></u> | ; |
| Registratio Division of Clifton Bui 2661 Exec Tallahasse | Corporations Ilding utive Center Circle e, Florida 32301 | Regis Divis P.O. I Tallal | LING ADDRESS: tration Section ion of Corporations 30x 6327 nassee, Florida 32314 | | | |
| Enclosed is a check (a) \$25 Filing Fee | for the following amount: \$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

| Paconia, LLC | |
|--|--|
| (Name of limited liability company) | |
| Delaware | |
| (Jurisdiction of its organization) | |
| 08/27/2013 | |
| (Date registered with Florida Department of State) | |
| M13000005405 | |
| (Florida Document Number) | |
| This limited liability company is withdrawing its certificate of authority in this Effective Date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to damore than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory fithis date will not be listed as the document's effective date on the Department. | (optional) ate of filing or ling requirements. |
| (Signature of authorized representative) Tracy Desautels | JAN 29 PH 3: 15 AHASSEC FLORIDA |
| (Typed or printed name of signee) | <u> </u> |

Filing Fee: \$25.00