M13000005870

(Re	equestor's Name))	
(Ad	dress)		
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PICK-UP	WAIT		MAIL
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(Bu	siness Entity Na	me)	. .
•	·	ŕ	
(Do	cument Number)	
Certified Copies	_ Certificate	s of	Status
Special Instructions to	Filing Officer:		<u> </u>
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•	Office Use Or	nlv	



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SECRETARY OF STATE
TALLAHASSEE.FLORID

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JAN 2 3 2015 J. HARRIS

COVER LETTER

TO: Registration Division of	Section Corporations		,
SUBJECT: CO	olonial Blva	d Self Stor	rage UC
		reign Limited Liability (
Dear Sir or Madam:			
The enclosed withdr	awal and fee(s) are submitte	d for filing.	
Please return all corr	respondence concerning this	matter to the following	;
Robin Hocheno	loner		,
	(Name of Person)		-
Veritage Manag	gement, Inc.		
	(Firm/Company)		•
8171 Maple La	wn Blvd #375		
	(Address)		
Fulton, MD 20	759		
	(City/State and Zip Cod	le)	•
For further informati	on concerning this matter, p	lease call:	
Robin Hocheno	loner	240 at (295-1623
(N	ame of Person)		Daytime Telephone Number)
Registratior Division of Clifton Buil 2661 Execu Tallahassee	Corporations Iding Itive Center Circle , 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	□ \$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Colonial Blvd Self Storage UC (Name of limited liability company)				
(Name of limited liability company)				
Delaware				
(Jurisdiction of its organization)				
(Date registered with Florida Department of State)				
(Date registered with Florida Department of State)				
M13000005870				
(Florida Document Number)				
This limited liability company is withdrawing its certificate of authority in this state.				
•				
Persondetell				
(Signature of authorized representative)				
Patricia Bowditch				
(Typed or printed name of signee)				

Filing Fee: \$25.00

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