

M13000007968

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK UP

☐

WAIT

☐

MAIL

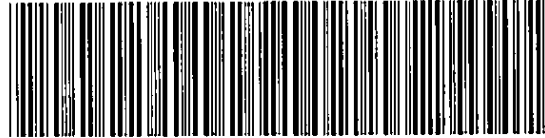
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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RECEIVED
MAY 14 AM 8:25
STATE
TALLAHASSEE, FL

RECEIVED
2021 MAY 14 PM 2:05
TALLAHASSEE, FLORIDA

MAY 14 2021

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

ACCOUNT NO. : I20000000195

REFERENCE : 813593 8026835

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : May 14, 2021

ORDER TIME : 11:13 AM

ORDER NO. : 813593-025

CUSTOMER NO: 8026835

FOREIGN FILINGS

NAME: 1900 SW 44TH AVENUE, 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: Alexxis Weiland - EXT#

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 1900 SW 44th Avenue, LLC

(Name 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:

Micah Goodman

(Name of Person)

Benefit Street Partners

(Firm/Company)

1345 Avenue of the Americas

(Address)

New York, NY 10105

(City/State and Zip Code)

For further information concerning this matter, please call:

Maggie Finnegan

(Name of Person)

212 588-6770
at (_____) _____
(Area Code & Daytime Telephone Number)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

- ☒ \$25 Filing Fee ☐ \$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

1900 SW 44th Avenue, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

12/17/2013

(Date registered with Florida Department of State)

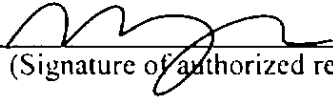
M13000007968

(Florida Document Number)

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)

Micah Goodman

(Typed or printed name of signee)

FILED
STATE
16 JAN 8:25
2014

Filing Fee: \$25.00