

M130 0000 8136

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Document Number)

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2019 MAR 25 AM 3:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

19 MAR 25 PM 1:46

2019 MAR 25

UJS
3-26-19

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

ACCOUNT NO. : I20000000195

REFERENCE : 696597 8198305

AUTHORIZATION :

COST LIMIT : \$25.00



ORDER DATE : March 25, 2019

ORDER TIME : 11:07 AM

ORDER NO. : 696597-025

CUSTOMER NO: 8198305

FOREIGN FILINGS

NAME: MOSS CAPE 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: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Moss Cape, 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:

Taylor Kohler
(Name of Person)

Copper River Shared Services, LLC
(Firm/Company)

4501 Singer Court, Suite 300
(Address)

Chantilly, VA 20151
(City/State and Zip Code)

For further information concerning this matter, please call:

Taylor Kohler
(Name of Person)

at (703) 234-3832
(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &
Certified Copy | <input type="checkbox"/> \$60 Filing Fee,
Certificate of Status &
Certified Copy |
|--|---|--|--|

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Mass Cape, LLC

(Name of limited liability company)

Alaska

(Jurisdiction of its organization)

12/23/2013

(Date registered with Florida Department of State)

M 13 00000 8136


(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)

JEFFREY C BARROS

(Typed or printed name of signee)

2019 MAR 25 AM 8:43
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

FILED

Filing Fee: \$25.00