

M14 000 000557

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

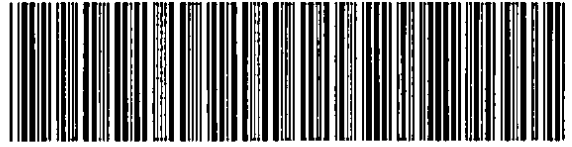
(Business Entity Name)

(Document Number)

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2021 JUN -8 PM 3:00  
SECRETARY OF STATE  
TALLAHASSEE, FL

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Morton Partners 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:

Cara L. Cortes  
\_\_\_\_\_

(Name of Person)

Peterson Paletta Balice, PLC  
\_\_\_\_\_

(Firm/Company)

5510 Cascade Road SE, Suite 220  
\_\_\_\_\_

(Address)

Grand Rapids, Michigan 49546  
\_\_\_\_\_

(City/State and Zip Code)

For further information concerning this matter, please call:

Cara L. Cortes  
\_\_\_\_\_

(Name of Person)

616

957-3540

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

Morton Partners LLC

(Name of limited liability company)

State of Michigan

(Jurisdiction of its organization)

January 24, 2014

(Date registered with Florida Department of State)

MI14000000557

(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.

Bernd Durstberger

(Signature of authorized representative)

Bernd Durstberger

(Typed or printed name of signee)

2021 JUN -8 PM 3:00  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

Filing Fee: \$25.00