M14000002827

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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SECRETARY OF STATE

T. HANNFTON.

COVER LETTER

TO: Registration Division of	Section Corporations			
SUBJECT: Mi	ami Restaurant Services #1,			
	(Name of For	eign Limited Liability C	ompany)	
Dear Sir or Madam:				
The enclosed withdr	awal and fee(s) are submitted	d for filing.		
Please return all corr	espondence concerning this	matter to the following:		
Kathleen M. La Ro	ock			
	(Name of Person)			
Clark Hill PLC				
	(Firm/Company)			
200 Ottawa Ave., N	IW, Ste. 500			
	(Address)			
Grand Rapida, MI	19503			
(City/State and Zip Code)				
For further informati	on concerning this matter, p	lease call:		
Kathleen La Rock		at (616)	608-1117	
(N	ame of Person)	(Area Code & I	Daytime Telephone Number)	
STREET/COURIER ADDRESS: MAILING ADDRESS:				
Registration Section Registration Section Division of Corporations Division of Corporations				
Clifton Building		P.O. Box 6327		
	61 Executive Center Circle Tallahassee, Florida 32314		assee, Florida 32314	
Enclosed is a check	for the following amount:			
S25 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

Miami Restaurant Services #1, LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
April 23, 2014
(Date registered with Florida Department of State)
M14000002827
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
Milus Walle II
(Signature of authorized representative)
Michael W. Ward
(Typed or printed name of signee)

Filing Fee: \$25.00

FILED

15 JUN -8 AM 11: 21

SECRETARY OF STATE
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