

M140000002841

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

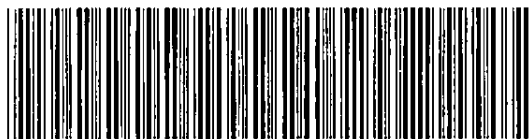
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CLERK OF STATE
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CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 717612 8073077

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : May 3, 2023

ORDER TIME : 10:55 AM

ORDER NO. : 717612-120

CUSTOMER NO: 8073077

FOREIGN FILINGS

NAME: ECLIPSE GRACE TENTH 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-sorenson - EXT#



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FLORIDA

2023 MAY -3 AM 11:18

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Eclipse Grace Tenth Avenue, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

04/25/2014

(Date registered with Florida Department of State)

M14000002841

(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.

/s/Stephanie Hammer

(Signature of authorized representative)

Stephanie Hammer

(Typed or printed name of signee)

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