

M 14 000003 115

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

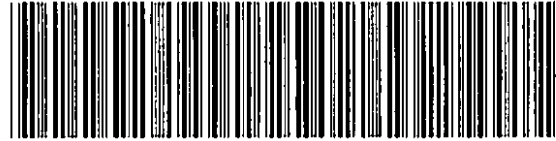
(Business Entity Name)

(Document Number)

to Copies _____ Certificates of Status _____

al Instructions to Filing Officer:

Office Use Only



000398470250

RECEIVED


2023 JAN 19 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

2023 JAN 19 AM 10:44
SECRETARY OF STATE
TALLAHASSEE, FL

ef 1/20/2023

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

ACCOUNT NO. : I20000000195
REFERENCE : 385867 7833946
AUTHORIZATION : 
COST LIMIT : \$ 25.00

ORDER DATE : January 18, 2023
ORDER TIME : 8:40 AM
ORDER NO. : 385867-010
CUSTOMER NO: 7833946

FOREIGN FILINGS

NAME: M-4000 ALTON OWNER, 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: M-4000 Alton Owner, 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:

Camilo Miguel, Jr.

(Name of Person)

M-4000 Alton MGR, LLC

(Firm/Company)

2601 S. Bayshore Drive, Ste. 850

(Address)

Miami, FL 33133

(City/State and Zip Code)

For further information concerning this matter, please call:

Carol Nazarkewich 305 531-2426

(Name of Person) 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:

- | | | | |
|--|---|--|--|
| <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 |
|--|---|--|--|

FILED

2023 JAN 19 AM 10:44

SECRETARY OF STATE
TALLAHASSEE, FL

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

M-4000 Alton Owner, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

May 7, 2014

(Date registered with Florida Department of State)

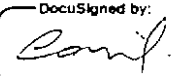
M114000003115

(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.

DocuSigned by:

00677556A090184

(Signature of authorized representative)

Camilo Miguel, Jr.

(Typed or printed name of signee)

Filing Fee: \$25.00