M14000003520

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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O SIMMONS FEB 28 2027 CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

4

ACCOUNT NO. : I2000000195					
REFERENCE : 514955 7833946					
AUTHORIZATION: Spullele man					
COST LIMIT : \$\square{25.00}					
ORDER DATE : February 25, 2022					
ORDER TIME : 10:39 AM					
ORDER NO. : 514955-010					
CUSTOMER NO: 7833946					
FOREIGN FILINGS					
NAME: EVERGLADES 350, LLC					
CORPORATE LIMITED PARTNERSHIP XXX LIMITED LIABILITY COMPANY					
XXXX WITHDRAWAL/CANCELLATION					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF STATUS					

EXAMINER:

CONTACT PERSON: Eyliena Baker - EXT#

COVER LETTER

		Section Corporations		
SUBJECT:	EVER	GLADES 350, LLC		
0000001.		(Name of Fo	reign Limited Liability	Company)
Dear Sir or N	Madam:			
The enclosed	d withdra	awal and fee(s) are submitte	ed for filing.	
Please return	all corr	espondence concerning this	matter to the following	;
Camilo Mig	uel, Jr.			
	· · · · · · ·	(Name of Person)		-
				_
		(Firm/Company)		
2601 S. Bay	shore Di	rive, Ste. 850		
		(Address)	-	•
Miami, FL 3	3133			
•		(City/State and Zip Coo	le)	-
For further in	ıformatio	on concerning this matter, p	lease call:	
Camilo Mig	uel, Jr.		305 at (531-2426
	(Na	me of Person)		Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Tall	ahass ec ,	Florida 32301 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

FILED

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SECREMAN INCIDENT OF AUTHORITY NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

EVERGLADES 350, LLC	
	(Name of limited liability company)
DELAWARE	
	(Jurisdiction of its organization)
MAY 22, 2014	
	(Date registered with Florida Department of State)
M14000003520	
	(Florida Document Number)
(If an effective date is more than 90 days afte Note: If the date insert	than the date of filing:
	(Signature of authorized representative)
Camilo N	Aiguel, Jr.
	(Typed or printed name of signee)