## M1400003810

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

Office Use Only



000386640090

2022 APR 27 AM 8: 26 Seore Transparent Tanna Transparent

RECEIVED
2022 APR 27 PM 4: 01

CORPORATION SERVICE COMPANY 1201 Hays Street

CERTIFIED COPY
YELAIN STAMPED COPY CERTIFICATE OF STATUS

CONTACT PERSON: Alexxis Weiland - EXT#

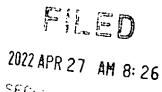
Tallahassee, FL 32301

Phone	: 850-55	8-1500				
		AC	COUNT NO.	:	120000000	195
			REFERENCE	:	642437	5168766
		AUTH	ORIZATION	: ~	Louis	•
		C	OST LIMIT	: 	(\$ 25.00	na
ORDER	DATE :	April	27, 2022			
ORDER	TIME :	2:06	PM			
ORDER	NO. :	642437	-040			
CUSTON	MER NO:	516	8766			
	•					<b></b>
			FOREIGN F	ILI:	<u>NGS</u>	
	NAME:	124	W NORVELL	BR	YANT HWY L	LC
<u></u>	CORPORAT LIMITED LIMITED	PARTNE	RSHIP ITY COMPAN	Y		
<u>XXXX</u> W	WARDHTIN	AL/CANC	ELLATION			
PLEASE	E RETURN	THE FO	LLOWING AS	PR	OOF OF FIL	ING:

EXAMINER:

## **COVER LETTER**

TO: Registration Division o	n Section f Corporations		
124 V SUBJECT:	V Norvell Bryant Hwy LLC		
SOBJECT:	(Name of For	eign Limited Liability	Company)
Dear Sir or Madam	:		
The enclosed withd	rawal and fee(s) are submitte	d for filing.	
Please return all cor	respondence concerning this	matter to the followin	g:
Andrea Saullo			
	(Name of Person)		_
124 W Norvell Bry	vant Hwy LLC		
-	(Firm/Company)		_
152 West 57th St	reet, 60th Floor		
	(Address)	_	_
New York, NY 10	019		
-	(City/State and Zip Cod	e)	_
For further informat	ion concerning this matter, p	olease call:	
Andrea Saullo		212 at (	649-9700
4)	ame of Person)	(Area Code &	& Daytime Telephone Number)
Division P.O. Box	ion Section of Corporations		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 SEE, FL

124 W Norvell Bryant Hwy LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
6/03/2021
(Date registered with Florida Department of State)
M1400003810
(Florida Document Number)
Effective Date, if other than the date of filing:
Jacqueline Price    Signature of authorized representative
Jacqueline Price
(Typed or printed name of signer)

Filing Fee: \$25.00