

M14000003923

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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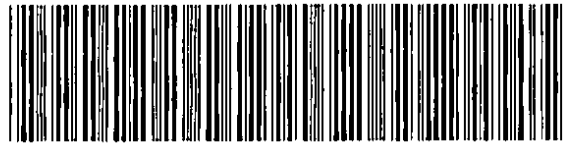
(Business Entity Name)

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DATE: 6/28/19

NAME: JETPORT VENTURES LLC

TYPE OF FILING: WITHDRAWAL

COST: 25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

Abbie Hodge

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations
JETPORT VENTURES, LLC

SUBJECT: _____
(Name of Foreign Limited Liability Company)

Mr or Madam:

Enclosed withdrawal and fee(s) are submitted for filing.

Return all correspondence concerning this matter to the following:

William D. Buckner

(Name of Person)

Buckner, Robinson & Mirkovich

(Firm/Company)

3146 Red Hill Ave., #200

(Address)

Costa Mesa, CA 92626

(City/State and Zip Code)

For further information concerning this matter, please call:

William Buckner

714

432-0990

(Name of Person)

at (_____) _____

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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

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TALLAHASSEE, FLORIDA

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NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

JETPORT VENTURES, LLC

(Name of limited liability company)

CALIFORNIA

(Jurisdiction of its organization)

June 5, 2014

(Date registered with Florida Department of State)

M14000003923

(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.



(Signature of authorized representative)

WILLIAM D. BUCKNER, ESQ., Authorized Agent

(Typed or printed name of signee)

Filing Fee: \$25.00

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