M146000033941

, .,,	(Requestor's Name)
was.	(Address)
·	
	(City/State/Zip/Phone #)
PICK-UI	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instruction	s to Filing Officer:
	Kill X

Office Use Only



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NECEIVED



DO NOT SEPARATE PLEASE

·				
ACCOUNT NO. : 12000000195				
REFERENCE : 651926 Na 6864A				
AUTHORIZATION :				
COST LIMIT : \$ 25.00				
ORDER DATE : June 1, 2015				
ORDER TIME : 4:10 PM				
ORDER NO. : 651926-010				
CUSTOMER NO: 6864A				
FOREIGN FILINGS NAME: CAR-BIO ADVISORS, 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				
CONTACT PERSON: Lydia Cohen - EXT# 62974				
EXAMINER:				

COVER LETTER

	gistration Section vision of Corporations		
SUBJECT	Car-Bio Advisors, LLC		
SUBJECT		oreign Limited Liability	Company)
Dear Sir or	Madam:		
The enclose	ed withdrawal and fee(s) are submitte	ed for filing.	
Please retur	n all correspondence concerning this	s matter to the following	;
Linda M.	Lee, Paralegal		
F-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	(Name of Person)		-
Cozen C	'Connor		
	(Firm/Company)		•
200 Four	Falls Corporate Ctr, Ste 40	00	
	(Address)		•
West Co	nshohocken, PA 19428		
	(City/State and Zip Cod	le)	
For further i	nformation concerning this matter, p	lease call:	
Linda Le	e	610	941-2378
	(Name of Person)	·	Daytime Telephone Number)
Reg Div Clii 266	REET/COURIER ADDRESS: distration Section ision of Corporations from Building 1 Executive Center Circle lahassee, Florida 32301	Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, Florida 32314
Enclosed is	a check for the following amount:		
2 \$ 25 Filing	Fee S30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Conv

FILED

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

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	000
+	SST CONTRACTOR OF THE CONTRACT

This limited liability company is withdrawing its certificate of authority in this state.

(Signature of authorized representative)

James R. Tolzien

(Typed or printed name of signee)

Filing Fee: \$25.00