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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name
Account Number: C T CORPORATION SYSTEM
Frame : CA000000023
Phone : (850) 205-8842 Fax Number : (850)878-5368

> LLC DISSOLUTION OR WITHDRAWAL BERRY UTOPIA II, LLC

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## **COVER LETTER**

TO: Registration Division of	n Section f Corporations				
Berry SUBJECT:	Utopia II, LLC				
	(Name of Fo	reign Limited Liability	Company)	·············	-
Dear Sir or Madam					
The enclosed withd	rawal and fcc(s) are submitte	d for filing.			
Please return all cor	respondence concerning this	matter to the following	:		
Jeannine Cheshire	,				
	(Name of Person)		_		
Vacek, Kiecke, Cu	rrier & Colmenero, LLP				
	(Firm/Company)		-		
P.O. Box 1845					
	(Address)		•		
Austin, TX 78767				ZEI SE	
	(City/State and Zip Cod	le)	•	LAAR SA	'cada
For further informa	tion concerning this matter, p	lease call:		IIII APR 27 SECRETARY	C CHES
Roy Kiecke		512 at (	472-2464	<u>ר</u> יים דיים דיים דיים דיים דיים דיים דיים	
C	lame of Person)		Daytime Telephon	S S	- S.
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
Enclosed is a check	t for the following amount:				
☑ \$25 Filing Fee	☐ \$30 Filing Fee & Certificate of Status	(1) \$55 Filing Fee & Certified Copy	S60 Filing F Certificate of Certified Co	f Status &	

4/27/2016 9:11:15 AM From: To: 8506176383( 3/3 )

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Berry Utopia II, LI	LC
	(Name of limited liability company)
Texas	
	(Jurisdiction of its organization)
June 18, 2014	
	(Date registered with Florida Department of State)
M14000004323	
	(Florida Document Number)
This limited liab	oility company is withdrawing its certificate of authority in this state.
_	Chlera Sakert
_	(Signature of authorized representative)
	Shaye Tackett
_	(Typed or printed name of signee)

Filing Fee: \$25.00

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