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(Re	equestor's Name)			
(Ac	ddress)	·		
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Y SULKER NOV 15 2021 CORPORATION SERVICE COMPANY 1201 Hays Street

CONTACT PERSON: Eyliena Baker - EXT#

Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 226862 AUTHORIZATION COST LIMIT ORDER DATE: November 12, 2021 ORDER TIME : 3:08 PM ORDER NO. : 226862-030 CUSTOMER NO: 7833946 FOREIGN FILINGS NAME: 2699 BAYSHORE GROUP, LLC ___ CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY XXXX WITHDRAWAL/CANCELLATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: __ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF STATUS

EXAMINER:

COVER LETTER

	gistration vision of	Section Corporations				
SUBJECT:	2699 B	2699 Bayshore Group LLC				
SOBSECT.		(Name of For	reign Limited Liability	Company)		
Dear Sir or l	Madam:					
The enclosed	d withdra	iwal and fee(s) are submitte	d for filing.			
Please return	n all corr	espondence concerning this	matter to the following	<u>5</u> :		
Camilo Mig	guel, Jr.					
		(Name of Person)		-		
M13-2699 S	S Baysho	re Associates, LLC				
		(Firm/Company)		-		
2601 S Bay	shore Dr	ive, Ste. 850				
		(Address)		-		
Miami, FL	33133					
	. <u>-</u>	(City/State and Zip Cod	le)	-		
For further i	nformati	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 Tallahassee. Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
		for the following amount:	_	_		
□ \$25 Filinş	g Fee	☐ \$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	☐ \$60 Filing Fee. Certificate of Status & Certified Copy		

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

2699 Bayshore Group LLC	
(Name of limited liability company)	
Delaware	
(Jurisdiction of its organization)	
June 20, 2014	
(Date registered with Florida Department of State)	
M14000004393	
(Florida Document Number)	
This limited liability company is withdrawing its certificate of authority in this	s state.
Effective Date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to domore than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory fithis date will not be listed as the document's effective date on the Department	iling requirements.
Docusioned by: Complete Complete	
(orginators of authorized representative)	
Camilo Miguel, Jr., Authorized Representative	
(Typed or printed name of signee)	TARY OF STATE

Filing Fee: \$25.00