

M14000004629

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

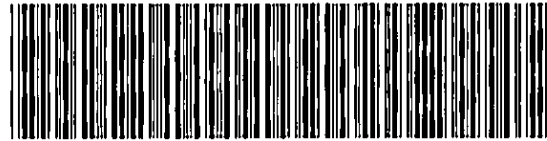
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100369261511



ALABAMA STATE FILING

2021 JUL -2 AM 11:40

FILED

Withdrawal

JUL 06 2021

ALBRITTON

2021 JUL -2 PM 12:01

FILED

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 890109 7477555
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 25.00

ORDER DATE : July 1, 2021
ORDER TIME : 10:07 AM
ORDER NO. : 890109-010
CUSTOMER NO: 7477555

FOREIGN FILINGS

NAME: PREDF-LEVERED, LLC

☐ CORPORATE
☐ LIMITED PARTNERSHIP
☒ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Eyliena Baker - EXT#

EXAMINER: *1a*

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PREDF-Levered, LLC

(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mary Eggers McCarroll

(Name of Person)

Principal Life Insurance Company

(Firm/Company)

711 High Street

(Address)

Des Moines, Iowa 50392

(City/State and Zip Code)

For further information concerning this matter, please call:

Mary Eggers McCarroll

(Name of Person)

515

362-1223

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

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

PREDF-Levered, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

June 30, 2014

(Date registered with Florida Department of State)

M14000004629

(Florida Document Number)

FILED
2021 JUL -2 PM 12:01
TALLAHASSEE, FL

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.

Rachel N. Parker

(Signature of authorized representative)

Rachel N. Parker

(Typed or printed name of signee)

Filing Fee: \$25.00