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| TO: | | ion Section of Corporations | | |
|--|-------------|---|---------------------------------------|---|
| SUBJE | CT: JC | M Edge WS, LLC | | |
| 0000 | | (Name of For | eign Limited Liability (| Company) |
| Dear Sir | or Mada | m: | | |
| The enc | losed with | drawal and fee(s) are submitted | d for filing. | |
| Please re | eturn all c | orrespondence concerning this | matter to the following: | |
| Gary | F. Joya | | | |
| | | (Name of Person) | | |
| Joya | l Capita | Management | | |
| | | (Firm/Company) | · · · · · · · · · · · · · · · · · · · | |
| 50 R | esnik Ro | oad, Suite 104 | | |
| | | (Address) | | |
| Plyn | nouth, M | 1A 02360 | | |
| | | (City/State and Zip Cod | e) | |
| For furtl | her inforn | ation concerning this matter, p | lease call: | |
| В | ecky Gr | eene | at (508 | 747-2237 |
| | | (Name 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 | | |
| Enclose | d is a che | ck for the following amount: | | |
| □ \$25 F | 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

| JCM Edge WS, LLC | |
|---|---|
| (Name of limited liability company) | - |
| Delware | |
| (Jurisdiction of its organization) | _ |
| January 14, 2014 | |
| (Date registered with Florida Department of State) | - |
| M14000005976 | |
| (Florida Document Number) | |
| This limited liability company is withdrawing its certificate of authority in this state. | |
| (Signature of authorized representative) Gary F. Joyal | |
| (Typed or printed name of signee) | |

Filing Fee: \$25.00