## M14 00000 6776

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	····
(Cit	y/State/Zip/Phone	e #)
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## **COVER LETTER**

Re	gistration Section	
Div	vision of Corporations	

Division of	Corporations	•	
	DENROD & REEL, LI	_C	
SUBJECT:	(Name of For	eign Limited Liability	Company)
Dear Sir or Madam:			
The enclosed withdra	awal and fee(s) are submitte	d for filing.	
Please return all corr	espondence concerning this	matter to the following	:
Justin Clouse			
	(Name of Person)		-
Goldenrod & Re	eel, LLC		
	(Firm/Company)		•
PO Box 1772			
	(Address)		•
Las Vegas NV	89125		
	(City/State and Zip Cod	le)	•
For further informati	on concerning this matter, p	lease call:	
Justin Clouse		321	233-6395
(Na	ame 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	
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

GOLDENROD & REEL, LLC
(Name of limited liability company)
WYOMING
(Jurisdiction of its organization)
09/17/2014
(Date registered with Florida Department of State)
M1400006776
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.

(Signature of authorized representative)

Justin Clouse

(Typed or printed name of signee)

Filing Fee: \$25.00