HILLOW 8038

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I20000000195 REFERENCE : 939034 8095330 AUTHORIZATION : Spelsble man COST LIMIT : \$ 25.00	
ORDER DATE : September 30, 2019	
ORDER TIME: 8:58 AM	
ORDER NO. : 939034-010	2
CUSTOMER NO: 8095330	0 616
FOREIGN FILINGS	1-1 11 9:39
CORPORATE LIMITED PARTNERSHIP XXX LIMITED LIABILITY COMPANY	
XXXX WITHDRAWAL/CANCELLATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF STATUS	

EXAMINER:

CONTACT PERSON: Amanda Robinson - EXT# 62968

COVER LETTER

	tion Section of Corporations			
SUBJECT: 233	2 17th Street, LLC			
Sobsticit.	(Name of Fo	reign Limited Liability	Company)	
Dear Sir or Mada	m:			
The enclosed with	ndrawal and fee(s) are submitte	ed for filing.		
Please return all c	correspondence concerning this	s matter to the following	;;	
Michelle Guzzett	a			
	(Name of Person)		-	
	(Firm/Company)		-	
4000 MacArthur	Blvd., Ste. 550			
	(Address)		-	
Newport Beach,	CA 92660			
	(City/State and Zip Coo	de)	-	2
For further inforn	nation concerning this matter, p	please call:		ند . چ د
Michelle Guzzett	a	949	381-7600	Ċ.
	(Name of Person)	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 che	ck 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

2332 17th Street, LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
11/05/2014
(Date registered with Florida Department of State)
M1400008038
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state. Effective Date, if other than the date of filing:
(Signature of authorized representative)
Carson Faris. Authorized Signer
(Typed or printed name of signee)