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

ACCOUNT NO. : I2000000195 REFERENCE : 800730 7486277 AUTHORIZATION COST LIMIT : (/\$ ORDER DATE : July 12, 2022 ORDER TIME : 3:41 PM ORDER NO. : 800730-005 CUSTOMER NO: 7486277 FOREIGN FILINGS NAME: AQUIOM, LLC ___ CORPORATE ___ LIMITED PARTNERSHIP XX 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: Eyliena Baker - EXT#

COVER LETTER

	on Section of Corporations		
Aqui	om, LLC		
SOBJECT:	(Name of For	eign Limited Liability	Company)
Dear Sir or Madan	n:		
The enclosed with	drawal and fee(s) are submitte	d for filing.	
Please return all co	orrespondence concerning this	matter to the followin	g:
Tally Carter			
	(Name of Person)		_
Aquiom, LLC			
	(Firm/Company)		
PO Box 278			
	(Address)		_
Andalusia, AL 36	6420		
	(City/State and Zip Cod	e)	_
For further information	ation concerning this matter, p	lease call:	
Tally Carter		334 at (868-0408
((Name of Person)	(Area Code &	& Daytime Telephone Number)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 816 Tallahassee, FL 32303
Enclosed is a chec	ck for the following amount:		
□\$25 Filing Fce	☐ \$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

Aquiom, LLC
(Name of limited liability company)
Alabama
(Jurisdiction of its organization)
12/31/2014
(Date registered with Florida Department of State)
M15000000010
(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: (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.
(Signature of authorized representative) Scott W. Trott (Typed or printed name of signee)
(Typed or printed name of signee)