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FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

2/24/16

NAME:

RECOVERY USA LLC

TYPE OF FILING: WITHDRAWAL

COST:

55.00

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

	nation Section on of Corporations				
Divisio	at or Corporations	Decement UCA	11.0		
	Recovery USA LLC				
SUBJECT:	Nome of Fo	reign Limited Liability	Company)		
	(Maine of Po	reign Emited Elability	company)		
Dans Circu Mar	1				
Dear Sir or Mac	ıam;				
The enclosed w	ithdrawal and fee(s) are submitte	ed for filing.			
Please return al	Please return all correspondence concerning this matter to the following:				
	(Name of Name)				
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	(Firm/Company)		•		
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For further info	rmation concerning this matter,	nlease call:			
10.10.00	manion concoming and manor,				
		at (800	345-4647		
	(Name of Person)	(Area Code &	Daytime Telephone Number)		
STRE	ET/COURIER ADDRESS:	МАП	LING ADDRESS:		
	ration Section	Registration Section			
	on of Corporations	Division of Corporations			
Cliftor	n Building	P.O. Box 6327			
	Executive Center Circle	Tallahassee, Florida 32314			
Tailah	assee, Florida 32301				
Enclosed is a c	theck for the following amount	:			
\$25 Filing F	cc \$30 Filing Fee &	\$55 Filing Fee &	\$60 Filing Fcc,		
	Certificate of Status	Certified Copy	Certificate of Status &		
			Certified Copy		



NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Recovery USA LLC	
(Name of limited liability company)	
Delaware	
(Jurisdiction of its organization)	
January 28, 2015	
(Date registered with Florida Department of State)	
M15000000719	'
(Florida Document Number)	
This limited liability company is withdrawing its certificate of authority in this state.	
(Signature of authorized representative)	
James T. Asali	
(Tuned or printed name of signes)	

Filing Fee: \$25.00