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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

FCA860000023

Phone Fax Number : (614)280-3338 : (954)208-0845

## LLC DISSOLUTION OR WITHDRAWAL VALMINOS, LLC

Certificate of Status	0
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Page Count	03
Estimated Charge	\$55.00

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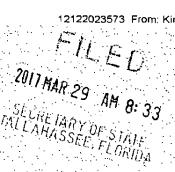
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## **COVER LETTER**

TO: Registration Division of	n Section Corporations		•
Valm subject:	inos, LLC		
	(Name of Fo	reign Limited Liability (	Company)
Dear Sir or Madam:			
The enclosed withdr	awal and fee(s) are submitte	d for filing.	
Please return all corr	espondence concerning this	matter to the following:	
Thomas G. Ro	ck		
	(Name of Person)		
Merced Capital	, LP		
	(Finn/Company)		
601 Carlson Pk	wy, Suite 200		
	(Address)		
Minnetonka, M	N 55305		
	(City/State and Zip Cod	le)	
For further informati	on concerning this matter, p	lease call:	
Thomas G Roo	k	952	476-7200
(N	ame of Person)		Daytime Telephone Number)
Registration Division of Clifton Bui 2661 Execu Tallahassee	Corporations	Registi Divisio P.O. H Tallaha	ING ADDRESS: ration Section on of Corporations ox 6327 assee, Florida 32314
3 \$25 Filing Fee	☐ \$30 Filing Fee & Certificate of Status	\$55 Filing Fee & Certified Copy	Certificate of Status & Certified Copy



## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Valminos, LLC					
Delaware	(Name of limite	ed liability compa	ny)		
02/25/2015	(Jurisdiction	of its organization	)		
M15000001509	(Date registered with F	Torida Departmen	it of State).		
This limited liability con		cument Number) its certificate of		state.	
Joel And		thorized repress	entative)		
	(Typed or pr	inted name of si	gnee)		

Filing Fee: \$25.00