

M15000001525

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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19 JUL 16 PM 11:30
TALLAHASSEE, FLORIDA
19 JUL 16 AM 10:50

K. SALLY
JUL 17 2019

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

ACCOUNT NO. : I20000000195

REFERENCE : 826569 8037396

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : June 28, 2019

ORDER TIME : 9:41 AM

ORDER NO. : 826569-010

CUSTOMER NO: 8037396

FOREIGN FILINGS

NAME: TIDAL BASIN COMMERCIAL
SERVICES, LLC

☐ CORPORATE
☐ LIMITED PARTNERSHIP
☒ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Lydia Cohen - EXT# 62974

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TIDAL BASIN COMMERCIAL SERVICES, LLC

(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Maria E. Suppa

(Name of Person)

Adjusters International

(Firm/Company)

126 Business Park Dr

(Address)

Utica, NY 13502-6302

(City/State and Zip Code)

For further information concerning this matter, please call:

Maria E. Suppa

(Name of Person)

at (315) 272 - 2120

(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 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

TIDAL BASIN COMMERCIAL SERVICES, LLC

(Name of limited liability company)

Virginia

(Jurisdiction of its organization)

02/20/2015

(Date registered with Florida Department of State)

M15000001525

(Florida Document Number)

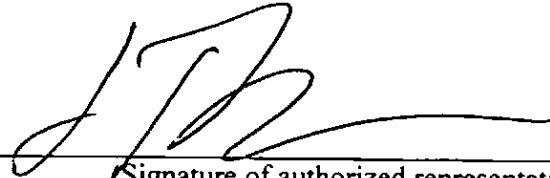
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TALLAHASSEE, FLORIDA

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)

Stephen T. Surace - Senior VP

(Typed or printed name of signee)

Filing Fee: \$25.00