

| (Re | equestor's Name) | | |
|---|--------------------|-------------|--|
| (Ac | ldress) | , 1111 | |
| · (Ac | ddress) | | |
| (Cit | ty/State/Zip/Phone | e #) | |
| PICK-UP | ☐ WAIT | MAIL | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies | _ Certificates | s of Status | |
| Special Instructions to Filing Officer: | | | |
| | | | |
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Office Use Only



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16 SEP 27 PH 12: 56

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COVER LETTER

| TO: Registration Division of | n Section Corporations | | |
|--|--|-------------------------------------|--|
| SSSP I | Preakness, LLC | | |
| 30 03 EC1. | (Name of Fo | reign Limited Liability | Company) |
| Dear Sir or Madam: | | | |
| The enclosed withdra | awal and fee(s) are submitte | ed for filing. | |
| Please return all corr | espondence concerning this | matter to the following | 3: |
| Eileen M. Heasley | | | |
| | (Name of Person) | | - |
| Simply Self Storage | | | |
| | (Firm/Company) | | - |
| 7505 West Sand Lal | ce Road | | |
| | (Address) | | - |
| Orlando, Florida 328 | 319 | | |
| | (City/State and Zip Cod | le) | - |
| For further informati | on concerning this matter, p | olease call: | |
| Eileen M. Heasley | | 407 | 914-2829 |
| (Na | ame of Person) | at ((Area Code & | Z Daytime Telephone Number) |
| Registration Division of Clifton Buil 2661 Execu Tallahassee | Corporations | Regis Divisi P.O. E Tallah | LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, Florida 32314 |
| 2 \$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

| SSSP Preakness, LLC | |
|---|--------|
| (Name of limited liability company) | |
| Delaware | |
| (Jurisdiction of its organization) | |
| March 6, 2015 | |
| (Date registered with Florida Department of State) | |
| M15000001758 | |
| (Florida Document Number) | - 12-2 |
| This limited liability company is withdrawing its certificate of authority in this state. | |
| | 16 SEP |
| (Signature of authorized-representative) | 27 |
| Kurt O'Brien | |
| (Typed or printed name of signee) | E2: 56 |

Filing Fee: \$25.00