## M150000 02127

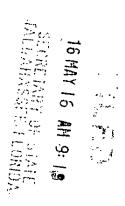
(1	Requestor's Name)			
(/	Address)			
· · · · · · · · · · · · · · · · · · ·	Address)			
(0	City/State/Zip/Phone #)			
PICK-UP	WAIT	MAIL		
(1	Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of Statu	us		
Special Instructions to Filing Officer:				
<u> </u>				

Office Use Only



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MAY 17 2016 J SHIVERS

## COVER LETTER . . .

FO: Registration Section Division of Corporations				
PALI SUBJECT:	TO CAPITAL LLC			
SOBJECT:	(Name of For	reign Limited Liability (	Company)	
Dear Sir or Madam:				
The enclosed withdr	awal and fee(s) are submitte	d for filing.		
Please return all corr	respondence concerning this	matter to the following	:	
ROMINA GRIN	BERG			
	(Name of Person)			
	(Firm/Company)			
5875 COLLINS	AVE #802			
	(Address)	•	-	
MIAMI BEACH	FLORIDA 33140			
	(City/State and Zip Cod	e)	-	
For further informati	on concerning this matter, p	lease call:		
PABLO LAHAN	1	786	290 1407	
(N	ame of Person)	(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

PALITO CAPITAL LLC	
(Name of limited liability company)	
DELAWARE	
(Jurisdiction of its organization)	<del></del>
03/20/2015	
(Date registered with Florida Department of State)	
M15000002127	
(Florida Document Number)	<del></del>
This limited liability company is withdrawing its certificate of authority in this state.  (Signature of authorized representative)  ROMNA GRINDERG  (Typed or printed name of signee)	16 MAY 16 AM 9: 1.

Filing Fee: \$25.00