M15000003058

(Requestor's Name)				
(Address)				
(,				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Control Control				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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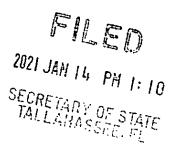
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2021 JAN 14 PM 1: 10 SECRETARY OF STATE

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COVER LETTER.

то:	Registration Division of	Section Corporations		
SUBJE	СТ:	LYNJC (Name of Beauty)	NLLC	1
		(Name of East	Limited Liability	Company)
Dear Si	r or Madam:			
The end	losed withdra	awal and fee(s) are submitted	d for filing.	
Please r	etum all corr	espondence concerning this	matter to the followin	g:
	JON	(Name of Person)	? 715C71	_
	1	YN JON (Firm/Company)	LLC	_
···				Now S-
		(City/State and Zip Code	V - 0.2	1059
For furt	ther informati	ion concerning this matter, p	lease call:	
	176	OVE ame of Person)	at (SO)	295-5403 R Daytime Telephone Number)
	Division (P.O. Box	on Section of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclose	ed is a check	for the following amount:		
\$1525	Filing Fee	☐ \$30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	S60 Filing Fee, Certificate of Status &



NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

LYNJON LLC (Name of limited liability company)
(Name of limited liability company)
T-LIT + VT (Jurisdiction of its organization)
(Jurisdiction of its organization)
(Date registered with Florida Department of State)
(Date registered with Florida Department of State)
M 15000003058
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state. Effective Date, if other than the date of filing:
(Signature of authorized representative)

Filing Fee: \$25.00

(Typed or printed name of signee)