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(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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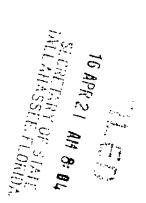
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RECEIVED



APR 22 2016

J SHIVERS

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 111864 4355846

AUTHORIZATION : Spell of

COST LIMIT : \$ 25.00

ORDER DATE: April 21, 2016

ORDER TIME: 9:56 AM

ORDER NO. : 111864-015

CUSTOMER NO: 4355846

FOREIGN FILINGS

NAME: R&R FOOD GROUP, LLC

CORPORATE
LIMITED PARTNERSHIP
XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF STATUS

CONTACT PERSON: Melissa Zender - EXT# 62956

EXAMINER:

COVER LETTER

TO:		istration ision of (Section Corporations		
SUBJE	CT:	R&R I	Food Group, LLC		
			(Name of For	eign Limited Liability	Company)
Dear Sir	r or N	1adam:			
The enc	losed	withdra	wal and fee(s) are submitte	d for filing.	
Please re	eturn	all corre	espondence concerning this	matter to the following	g:
Terri S	Syke	es			
			(Name of Person)		_
Brinke	er In	ternati	onal, Inc.		
		,	(Firm/Company)		_
6820	LBJ	Freev	vay		
			(Address)		-
Dallas	s, T	X 7524	10		
			(City/State and Zip Coo	ie)	-
For furt	her i	nformati	on concerning this matter, p	olease call:	
Terri (Syk	es		972 at (770-9423
		(Na	ume of Person)	(Area Code	& Daytime Telephone Number)
				ILING ADDRESS: stration Section	
			Division of Corporations		
Clifton Building P.C		Box 6327			
			tive Center Circle , Florida 32301	Talla	hassee, Florida 32314
Enclose	ed is	a check	for the following amount:	:	
2 \$25	Filinį	g Fee	□ \$30 Filing Fee & Certificate of Status	☐ \$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status &

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

R&R Food Group, LLC			
	(Name of limited liability company)		
Delaware			
	(Jurisdiction of its organization)		
May 1, 2015			
(E	Pate registered with Florida Department of State)		
M15000003375			
	(Florida Document Number)		
JA.	any is withdrawing its certificate of authority in this state.		
70	(Signature of authorized representative)		
Bryan D. McCrory		35	
	(Typed or printed name of signee)	ORGIARY OF STAIL	a production of the second

Filing Fee: \$25.00