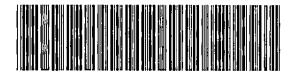
## M15000003545

(Requestor's Name)	
(Address)	
(Address)	
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PICK-UP WAIT	MAIL
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## **COVER LETTER**

Division of	Corporations			
	ETIZE, LLC			
SUBJECT:	(Name of Fo	reign Limited Liability	Company)	<del></del>
Dear Sir or Madam:				
The enclosed withdr	awal and fee(s) are submitte	ed for filing.		
Please return all con	respondence concerning this	s matter to the following	g:	
Jenny E. Maloney				
	(Name of Person)		_	
Shulman Rogers Ga	ndal Pordy & Ecker, PA			
	(Firm/Company)		_	21
12505 Park Potoma	c Avenue, Sixth Floor			2019 FEB
	(Address)	<del> </del>	_	3 6
Potomac, MD 2085	1			2
	(City/State and Zip Coo	de)	-	PII 1: 29
For further informati	on concerning this matter, p	blease call:		
Jenny E. Maloney		301 at (	255-0539	
(Na	ame of Person)	_ \	: Daytime Telephone Number)	
Registration Division of Clifton Buil 2661 Execu	Corporations	Regis Divisi P.O. I	LING ADDRESS: tration Section on of Corporations Box 6327 tassee, Florida 32314	
Enclosed is a check	for the following amount:			
☐ \$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy	:

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

VENUETIZE, LLC	
(Name of limited liability company)	
Delaware	
(Jurisdiction of its organization)	
May 5, 2015	
(Date registered with Florida Department of State	e)
M15000003545	
(Florida Document Number)	
This limited liability company is withdrawing its certificate of authority	y in this state.
Effective Date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be pr more than 90 days after filing.)  Note: If the date inserted in this block does not meet the applicable stat this date will not be listed as the document's effective date on the Depart	tutory filing requirements,
Signature of authorized representative)  Jenny E. Maloney	2019 FEB - 6 P
(Typed or printed name of signce)	
	Signatura No.

Filing Fee: \$25.00