

M1500000 5240

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 05 2016
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DELTAMED PARTNERS LLC
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

GERBEN DE JONG
(Name of Person)

DELTAMED PARTNERS LLC
(Firm/Company)

445 COVE TOWER DR. #702
(Address)

NAPLES FL 34110
(City/State and Zip Code)

For further information concerning this matter, please call:

GERBEN DE JONG at (352) 514-0889
(Name 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 21, 2015

GERBEN DE JONG
445 COVE TOWER DR #702
NAPLES, FL 34110

SUBJECT: DELTAMED PARTNERS LLC
Ref. Number: M15000005240

We have received your document for DELTAMED PARTNERS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The jurisdiction under the laws of which the entity is incorporated or organized must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 315A00026675

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FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

2015 DEC 30 AM 11: 23

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NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

DELTAMED PARTNERS LLC

(Name of limited liability company)

DELAWARE

(Jurisdiction of its organization)

7/2/15

(Date registered with Florida Department of State)

M15000005240

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

Gerben De Jong

(Signature of authorized representative)

GERBEN DE JONG

(Typed or printed name of signee)

Filing Fee: \$25.00

2015 DEC 30 AM 11:23
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA