

M1500005993

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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R. WHITE
JUL 20 2020

2020 JUL 20 15:00:12

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 356537 7230352
AUTHORIZATION : 
COST LIMIT : \$ 25.00

ORDER DATE : July 15, 2020

ORDER TIME : 11:57 AM

ORDER NO. : 356537-010

CUSTOMER NO: 7230352

FOREIGN FILINGS

NAME: PROQUEST ASSOCIATES III LLC

☐ CORPORATE
☐ LIMITED PARTNERSHIP
☒ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Amanda Robinson - EXT# 62968

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ProQuest Associates III 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:

Pasquale DeAngelis

(Name of Person)

ProQuest Investments
(Firm/Company)

PO Box 406

(Address)

Buckingham, PA 18912

(City/State and Zip Code)

For further information concerning this matter, please call:

Pasquale DeAngelis at (609) 319-2929
(Name of Person) (Area Code & Daytime Telephone Number)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

ProQuest Associates III LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

7/29/2015

(Date registered with Florida Department of State)

M15000005993

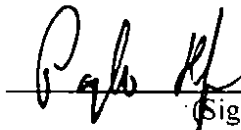
(Florida Document Number)

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

Effective Date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.



(Signature of authorized representative)

Pasquale DeAngelis

(Typed or printed name of signee)

2016. 07. 15 PM 4:18

Filing Fee: \$25.00