M15000006476

(Re	questor's Name)			
(Ad	dress)	·		
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(City/State/Zip/Phone #)				
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C. BRUMBLEY FEB 1 6 2022

COVER LETTER

TO: Registration Division of	Section Corporations		*
	m Capital III, LLC		•
SUBJECT:	(Name of Fo	reign Limited Liability	Company)
Dear Sir or Madam:			
The enclosed withdr	awal and fee(s) are submitte	ed for filing.	
Please return all corr	espondence concerning this	matter to the followin	ā:
Heather Hassinger			
	(Name of Person)		_
Eastham Capital, Inc	<u>:</u> .		
	(Firm/Company)		_
6001 Broken Sound	Pkwy NW, Suite 510		
	(Address)		_
Boca Raton, FL 334	187		
	(City/State and Zip Cod	le)	_
For further informati	on concerning this matter, p	olease call:	
Heather Hasinger		56 l at (571-7100
(N:	ame of Person)	(Area Code &	& Daytime Telephone Number)
Division of 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
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

Eastham Capi	tal III, LLC	
	(Name of limited liability company)	
Delaware		
	(Jurisdiction of its organization)	
August 17, 20	15	
	(Date registered with Florida Department of State)	
M1500000641	76	
	(Florida Document Number)	
This limited	liability company is withdrawing its certificate of authority in t	his state.
(If an effect more than 9 Note: If the	ate, if other than the date of filing: ive date is listed, the date must be specific and cannot be prior to 0 days after filing.) date inserted in this block does not meet the applicable statutory I not be listed as the document's effective date on the Departme	y filing requirements,
	Mu -	
	(Signature of authorized representative)	2022 FEB -7
	Matthew Rosenthal, Manager	E T
	(Typed or printed name of signee)	-7 AM 9:59

Filing Fee: \$25.00