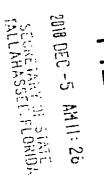


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D. W.

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

ACCOUNT NO. : I20000000195

REFERENCE : 515061 4321040

AUTHORIZATION : STANDARD STA

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: Emily Croft - EXT# 62925

EXAMINER:

COVER LETTER

	ation Section n of Corporations		
	ort Charles LLC		
SUBJECT:	(Name of Fo	oreign Limited Liability	Company)
Dear Sir or Mad	ain:		
The enclosed wit	thdrawal and fee(s) are submitte	ed for filing.	
Please return all	correspondence concerning this	s matter to the following	;
Carlen C. Seller	s		
	(Name of Person)		•
Schiff Hardin Ll	LP		
	(Firm/Company)		
233 S. Wacker D	Drive, Ste. 7100		
	(Address)		•
Chicago, IL 606	06-6446		
	(City/State and Zip Co.	de)	•
For further inforr	nation concerning this matter, 1	please call;	
Carlen C. Sellers	;	312 at (258-4526
	(Name of Person)		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	
	eck for the following amount:	:	
🗅 \$25 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

Fort Charles LLC		
(Name of limited liability company)		
Wisconsin		
(Jurisdiction of its organization)		
08/26/2015		
(Date registered with Florida Department of State)		
M15000006882		
(Florida Document Number)		
This limited liability company is withdrawing its certificate of authority in this s	tate.	
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 dat	e of filing or	
more than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory fili	no requirements	
this date will not be listed as the document's effective date on the Department of		
·		
(Signature of authorized representative)		
(orginature of authorized representative)	77	
Jeanna L. French, Manager	2018 SEC	
	DEC AHA	70
(Typed or printed name of signee)	S = 1	
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Filing Fee: \$25.00