M15000008245

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| (=,, = |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| |
| Special Instructions to Filing Officer: |
| |
| |
| |
| |
| |
| |

Office Use Only



300378375873

2022 JAN 10 AM II: 4.

WillyCllv(I)

JAN 1 1 2022 I ALBRITTON CORPORATION SERVICE COMPANY 1201 Hays Street

Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 367270 7396281

AUTHORIZATION : Oppulled man

COST LIMIT : \$ 25.00

ORDER DATE : January 7, 2022

ORDER TIME : 10:29 AM

ORDER NO. : 367270-180

CUSTOMER NO: 7396281

FOREIGN FILINGS

NAME: BRE PARAGON MF LAGUNA BAY ADD

ON FL, LLC

CORPORATE

LIMITED PARTNERSHIP

XX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF STATUS

CONTACT PERSON: Eyliena Baker - EXT#

EXAMINER!

 $\frac{10}{10}$

COVER LETTER

TO: Registration Section Division of Corporations BRE Paragon MF Laguna Bay Add On FL, LLC SUBJECT: (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: (Name of Person) (Firm/Company) (Address) (City/State and Zip Code) For further information concerning this matter, please call: (Area Code & Daytime Telephone Number) (Name of Person) Mailing Address: Street Address: Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Enclosed is a check for the following amount: **■\$25** Filing Fee ☐ \$30 Filing Fee & □\$55 Filing Fee & ☐ \$60 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

| BRE Paragon MF Laguna Bay Add On FL, LLC | 2 |
|---|------------------|
| (Name of limited liability company) | |
| Determen | · <u></u> . : |
| Delaware | |
| (Jurisdiction of its organization) | <u> </u> |
| 10/14/2015 | <u> </u> |
| (Date registered with Florida Department of State) | cio |
| M15000008245 | ပာ |
| (Florida Document Number) | |
| Effective Date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of more than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory filing this date will not be listed as the document's effective date on the Department of St | requirements. |
| Joseph Valare (Signature of authorized representative) Joseph Valane | |
| (Typed or printed name of signes) | |

Filing Fee: \$25.00