M15000008374

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



600306902876

12/22/17--01020--015 **52.50

------ 01/12/18--01003--001 **7.50

FILED

18 JAN 11 PH 12:1

SLOW THE STATE STATE

SLOW THE SLOW THE STATE

SLOW THE SLOW THE

LEGGETT WIN



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 26, 2017

ORAL BEASON, ESQ 43 S POMPANO PARKWAY, PMB #112 POMPANO BEACH, FL 33069 US

SUBJECT: LIFELONG GLOBAL INSURANCE, LLC

Ref. Number: M15000008374

We have received your document for LIFELONG GLOBAL INSURANCE, LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of 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.

Letter Number: 217A00026048

Judy A Leggett Regulatory Specialist II Registration Section

www.sunbiz.org

COVER LETTER

TO:

Registration Section

Division of Corporations LIFELONG GLOBAL INSURANCE, 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: Oral Beason, Esq. (Name of Person) Litai Assets LLC (Firm/Company) 43 S. Pompano Parkway, PMB #112 (Address) Pompano Beach, FL 33069 (City/State and Zip Code) For further information concerning this matter, please call: Oral Beason, Esq. (Area Code & Daytime Telephone Number) (Name of Person) STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: □ \$25 Filing Fee □ \$30 Filing Fee & □ \$55 Filing Fee & ■ \$60 Filing Fee, Certificate of Status & Certificate of Status Certified Copy Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

CELONG GLOBAL INUSRANCE, LLC
(Name of limited liability company)
e State of Delaware
(Jurisdiction of its organization)
sober 8, 2015
(Date registered with Florida Department of State)
5000008374
(Florida Document Number)
ective Date, if other than the date of filing: December 20, 2017 an effective date is listed, the date must be specific and cannot be prior to date of filing or re than 90 days after filing.) te: If the date inserted in this block does not meet the applicable statutory filing requirements date will not be listed as the document's effective date on the Department of State's records.
Signature of authorized representative)
Jan-Eric Samuel
(Typed or printed name of signee)

Filing Fee: \$25.00