

M15000008850

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

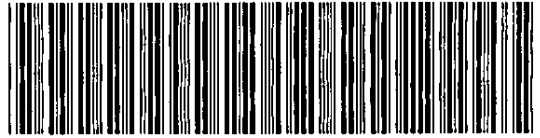
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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15 DEC 15 PM 1:01  
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2015 DEC 15 P 12:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DEC 16 2015  
BRUCE

# Advanced Incorporating Service, Inc.

1317 California Street  
P.O. Box 20396  
Tallahassee, FL 32316

Phone: 850-222-CORP  
Fax: 850-575-2724  
Email: [orders@aisincfl.com](mailto:orders@aisincfl.com)  
Website: [www.aisincfl.com](http://www.aisincfl.com)

|                                                        |                     |
|--------------------------------------------------------|---------------------|
| NAME OF ENTITY<br><u>Harlie Groves Apartments, LLC</u> | FOR OFFICE USE ONLY |
|                                                        |                     |
|                                                        |                     |
|                                                        |                     |

## PICK ONE:

☐ CERTIFIED COPY ☒ PHOTOCOPY ☐ C.U.S.

## FILING:

☐ CORPORATION ☐ LLC ☐ LIMITED PARTNERSHIP ☐ GENERAL PARTNERSHIP  
☐ FICTITIOUS NAME ☐ SERVICEMARK/TRADEMARK ☐ AMENDMENT  
☐ FOREIGN QUALIFICATION ☐ JUDGMENT LIEN  
☒ OTHER Withdrawal

## RETRIEVAL:

☐ GOOD STANDING CERT/C.U.S. ☐ CERTIFIED COPY ☐ PHOTO  
Of \_\_\_\_\_

## APOSTILLE/CERTIFICATION REQUEST:

Country \_\_\_\_\_

Amount of Documents \_\_\_\_\_

DATE 12/15 TIME \_\_\_\_\_

Notes: \_\_\_\_\_

FILED  
2015 DEC 15 P 12:41  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

**NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY**

HARTLE GROVES APARTMENTS, LLC

(Name of limited liability company)

DELAWARE

(Jurisdiction of its organization)

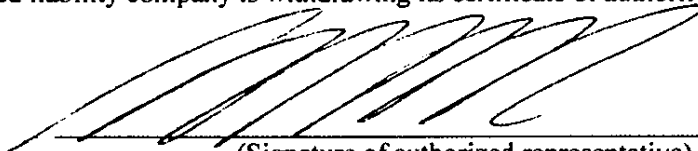
November 3, 2015

(Date registered with Florida Department of State)

M15000008850

(Florida Document Number)

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



(Signature of authorized representative)

WARREN E WILLIAMS

(Typed or printed name of signee)

**FILED**

2015 DEC 15 P 12:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Filing Fee: \$25.00**