M15000009905

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

Office Use Only

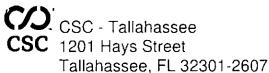


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850-558-1500, Ext: x61563

To: Department Of State, Division Of Corporations

From: Shauna Godbolt

Ext: x61563 Date: 11/12/24 Order #: 1677167-4

Re: 1300 South Miami Employer, LLC

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Withdrawal Amount to be deducted from our State Account: \$25.00 - FL State Account Number: I2000000195

Please take the following action: File in your office on basis Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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COVER LETTER

	gistration rision of C	Section Forporations		
SUBJECT:	1300 S	outh Miami Employer. LL	.c	
SOBJECT.		(Name of For	eign Limited Liability	Company)
Dear Sir or N	Madam;			
The enclosed	d withdray	wal and fee(s) are submitte	d for filing.	
Please return	all corre	spondence concerning this	matter to the followin	g:
Alex Herna	ndez			
		(Name of Person)	· · · · · ·	_
c/o Ennism	ore			
		(Firm/Company)		_
101 N10th	Street, S	tudio 204		
		(Address)		
Brooklyn, N	NY 11249)		
		(City/State and Zip Cod	e)	_
For further in	nformatio	n concerning this matter, p	lease call:	
Alex Herna	ndez		917 at (8058650
	(Nai	ne of Person)		& Daytime Telephone Number)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is	a check f	or the following amount:		
□\$25 Filing	g 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

1300 South Miami Employer, LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
December 08, 2015
(Date registered with Florida Department of State)
M15000009905
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
Effective Date, if other than the date of filing:
Signed by: (Signature of authorized representative) Philippe Zrihen (Typed or printed name of signee)
(Typed or printed name of signee)

WD-10414

Filing Fee: \$25.00