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		co	OVER LETTER	₹
TO:	Registration Division of	Section Corporations		
GUD D		V OSCEOLA-CC. LLC		
SUBJI	EC1:	(Name of For	eign Limited Liability	Company)
Dear S	ir or Madam:			
		awal and fee(s) are submitted	d for filing	
		espondence concerning this	<u>-</u>	<u>i</u> ;
		Wendy Mullins		
		(Name of Person)	_	-
		Molpus Woodlands Group		
		(Firm/Company)		-
		858 North Street		
		(Address)		-
		Jackson, MS 39202		
		(City/State and Zip Code	e)	-
For fur	ther informati	on concerning this matter, p	lease call:	
	We	endy Mullins	601	948-8733
	(Na	ame of Person)	at (_) c 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
Enclos	ed is a check	for the following amount:		
□ \$ 25	Filing Fee	■ \$30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee. Certificate of Status & Certified Conv

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

MWF IV OSCEOLA-CC, LLC					
(Name of limited liability company)					
Delaware					
(Jurisdiction of its organization)					
12/17/2015					
(Date registered with Florida Department of State)					
M15000010102					
(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: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Wendy Mullins- General Counsel (Typed or printed name of signee)					

Filing Fee: \$25.00